MEDICAL ONCOLOGY

Provider Orientation Session for Oscar

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Submitting Requests

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How to Request Prior Authorization

The EviCore Provider Portal is the easiest, most efficient way to request clinical reviews and check statuses.

- **Save time**: Quicker process than requests by phone or fax.
- **Available 24/7.**
- **Save your progress**: If you need to step away, you can save your progress and resume later.
- **Upload additional clinical information**: No need to fax supporting clinical documentation; it can be uploaded on the portal.
- **View and print determination information**: Check case status in real time.
- **Dashboard**: View all recently submitted cases.
- **E-notification**: Opt to receive email notifications when there is a change to case status.
- **Duplication feature**: If you are submitting more than one request, you can duplicate information to expedite submissions.

To access the EviCore Provider Portal, visit www.EviCore.com

Phone: 855-252-1118
Monday – Friday
7 AM – 7 PM (local time)

Fax: 800-540-2406

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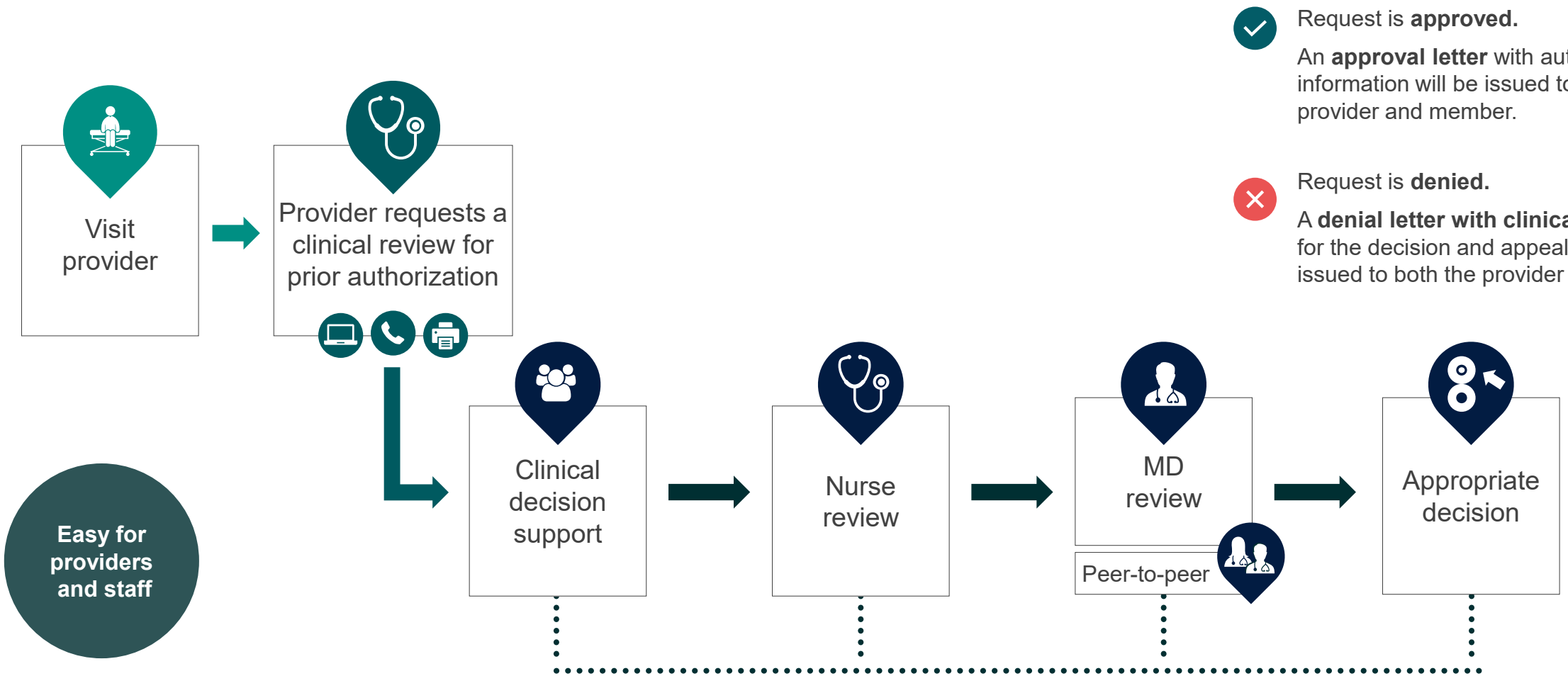
Utilization Management | Prior Authorization



Request is **approved.**

An **approval letter** with authorization information will be issued to both the provider and member.

Request is **denied.**

A **denial letter with clinical rationale** for the decision and appeal rights will be issued to both the provider and member.

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Necessary Information for Prior Authorization

To obtain prior authorization on the very first submission, the provider submitting the request will need to gather information within four categories:

Member
- Health Plan ID
- Member name
- Date of birth (DOB)

Referring (Ordering) Provider
- Physician name
- National provider identifier (NPI)
- Phone & fax number

Rendering Facility
- Facility name
- Address
- National provider identifier (NPI)
- Tax identification number (TIN)
- Phone & fax number

Supporting Clinical
- Pertinent clinical information to substantiate medical necessity for the requested service
- CPT/HCPCS Code(s)
- Diagnosis Code(s)
- Previous test results

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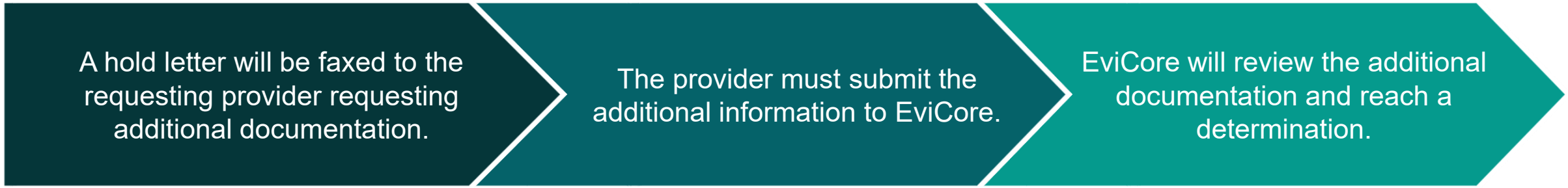
Insufficient Clinical | Additional Documentation Needed

If during case build all required pieces of documentation are not received, or are insufficient for EviCore to reach a determination, the following will occur:



The hold letter will inform the provider about what clinical information is needed, as well as the **date by which it is needed**.

Requested information must be received within the timeframe as specified in the hold letter, or EviCore will render a determination based on the original submission.

Determination notifications will be sent.

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Information needed

The following information must be provided to initiate the Lab prior authorization request:

Nonclinical information

+ Member Name and date of birth
+ Member Identification Number
+ Referring provider name and address
+ Laboratory Name and address
+ Both provider's National Provider Identification (NPI) Number
+ Phone and Fax Numbers
+ Tax Identification Number (TIN)

Clinical information

+ Details about the test being performed (test name, description and/or unique identifier)
+ All information required by applicable policy
+ Test indication, including any applicable signs and symptoms or other reasons for testing
+ Any applicable test results (laboratory, imaging, pathology, etc.)
+ Any applicable family history
+ How test results will impact patient care

EviCore requires verification elements on clinical documentation when submitted. The member's name (first and last) and one additional identifier: Member's date of birth, the member identification number or the member's driver's license number or other government-issued ID.

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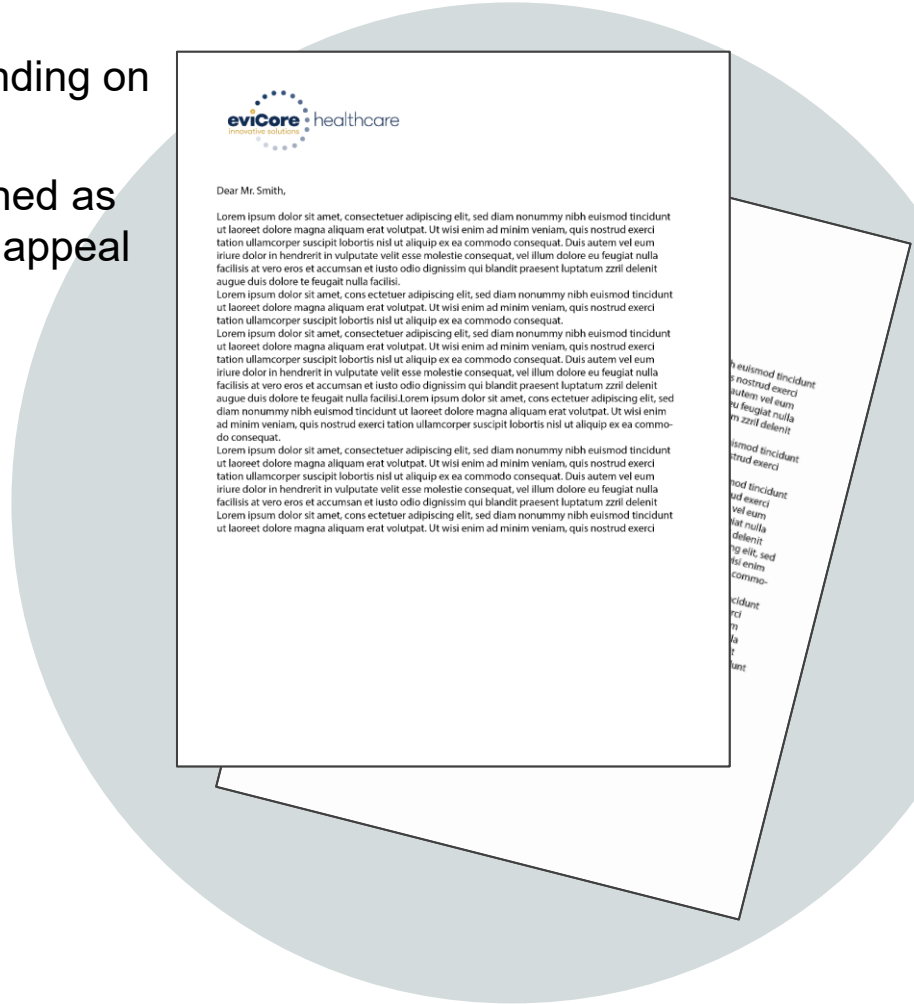
Prior Authorization Outcomes

Determination Outcomes:

- **Approved Requests:** Authorizations are typically valid for 6 to 12 months depending on the from the date of approval.
- **Denied Requests:** Based on evidence-based guidelines, if a request is determined as inappropriate, a notification with the rationale for the decision and post decision/ appeal rights will be issued.

Notifications:

- Authorization letters will be faxed to the ordering provider.
- Web initiated cases will receive e-notifications when a user opts to receive.
- Members will receive a letter by mail.
- Approval information can be printed on demand from the EviCore portal: www.EviCore.com



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Special Circumstances

Urgent Prior Authorization Requests

- EviCore uses the NCQA/URAC definition of **urgent**: when a delay in decision-making may seriously jeopardize the life or health of the member.
- Can be initiated on provider portal or by phone.
- Urgent cases are typically reviewed within 24 to 72 hours.

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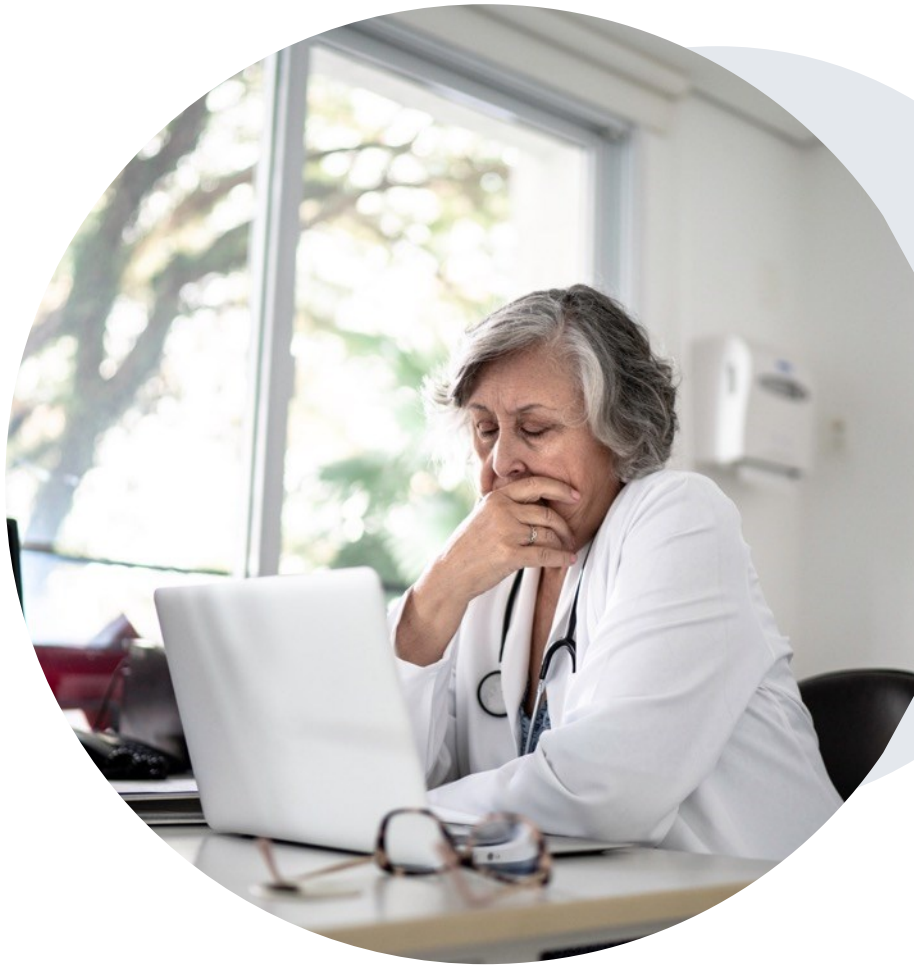
Special Circumstances

Authorization Update

- If updates are needed on an existing authorization, you can contact EviCore by phone at 855-252-1118
- While EviCore needs to know if changes are made to the approved request, any change could result in the need for a separate clinical review and require a new request (and the original approved request would need to be withdrawn).
- If the authorization is not updated, it may result in a claim denial.



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Post-Decision Options

My case has been denied. What's next?

Your determination letter is the best immediate source of information to assess what options exist on a case that has been denied.

You may also call EviCore at **888-333-8641** to speak with an agent who can provide available option(s) and instruction on how to proceed.

Alternatively, select "All Post Decisions" under the authorization lookup function on **EviCore.com** to see available options.

Reconsiderations

- Reconsiderations must be requested within 7 business days after the determination date.
- Reconsiderations can be requested verbally via a Clinical Consultation with an EviCore physician.

Appeals

- EviCore will process first-level appeals.
- Requests for appeals must be submitted in writing to EviCore **within 180 days** of the initial determination.
- A written notice of the appeal decision will be **mailed** to the member and **faxed** to the provider.

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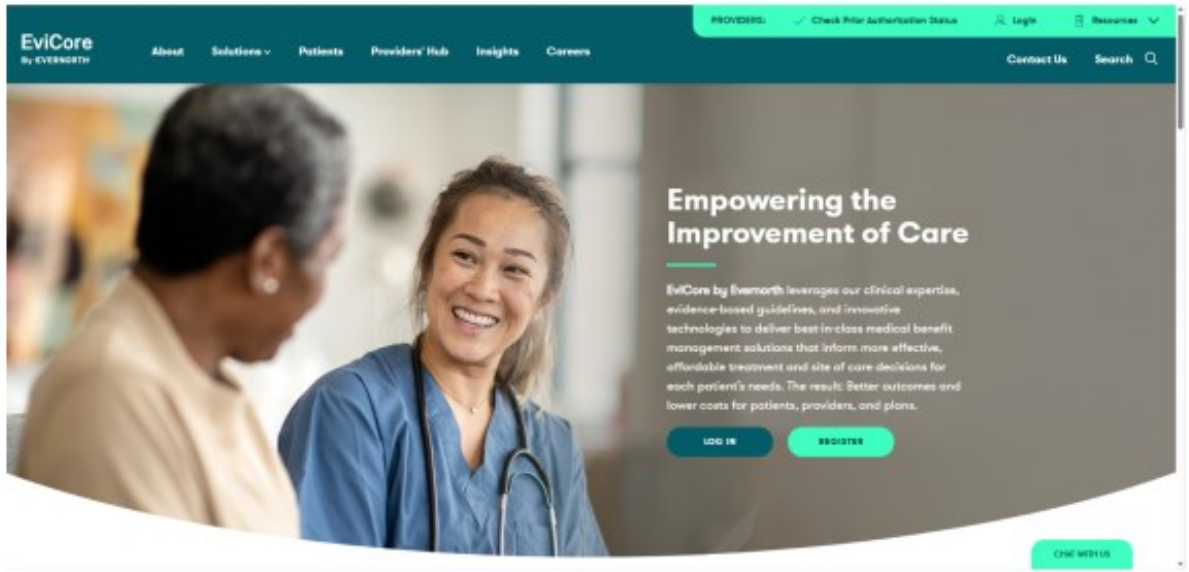
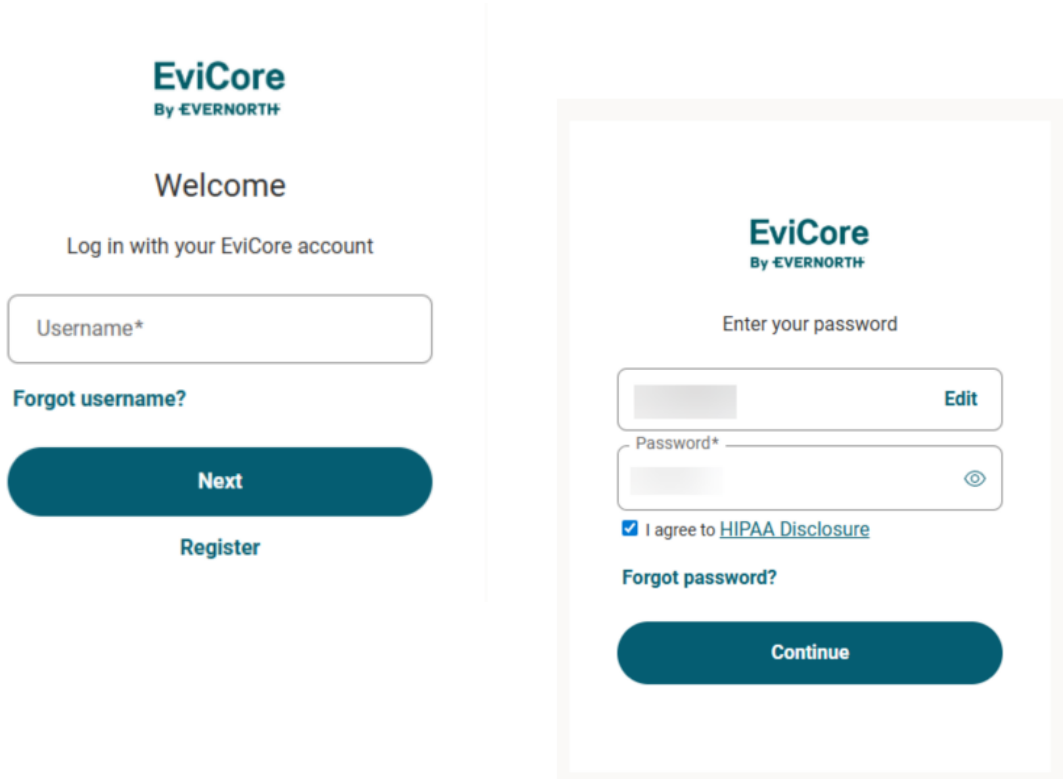
Provider Experience – Medical Oncology Submission



Providers will log in through the eviCore healthcare portal



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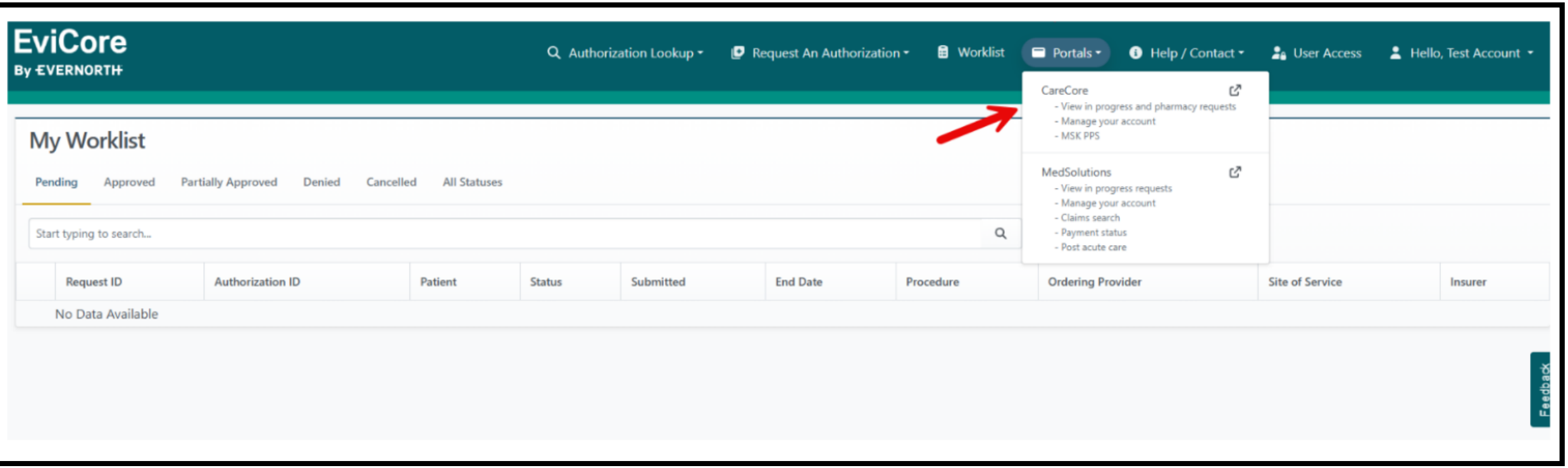
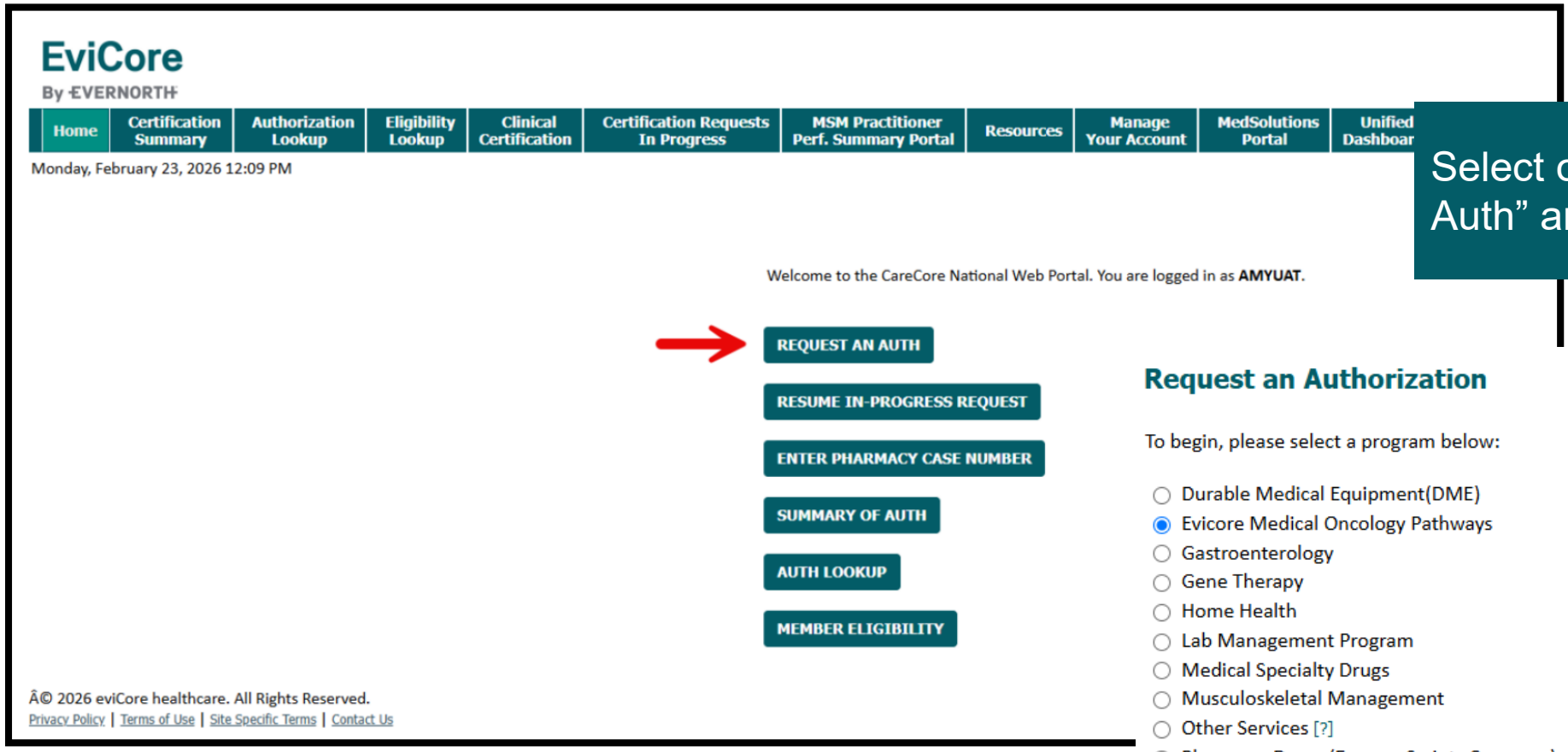
Provider Experience – Case Submission

Once logged in, the worklist of a user's prior requests are visible. To create a new prior authorization, select 'Request an Authorization'



Provider Experience – Case Submission



Select option to “Request an Auth” and then the program.

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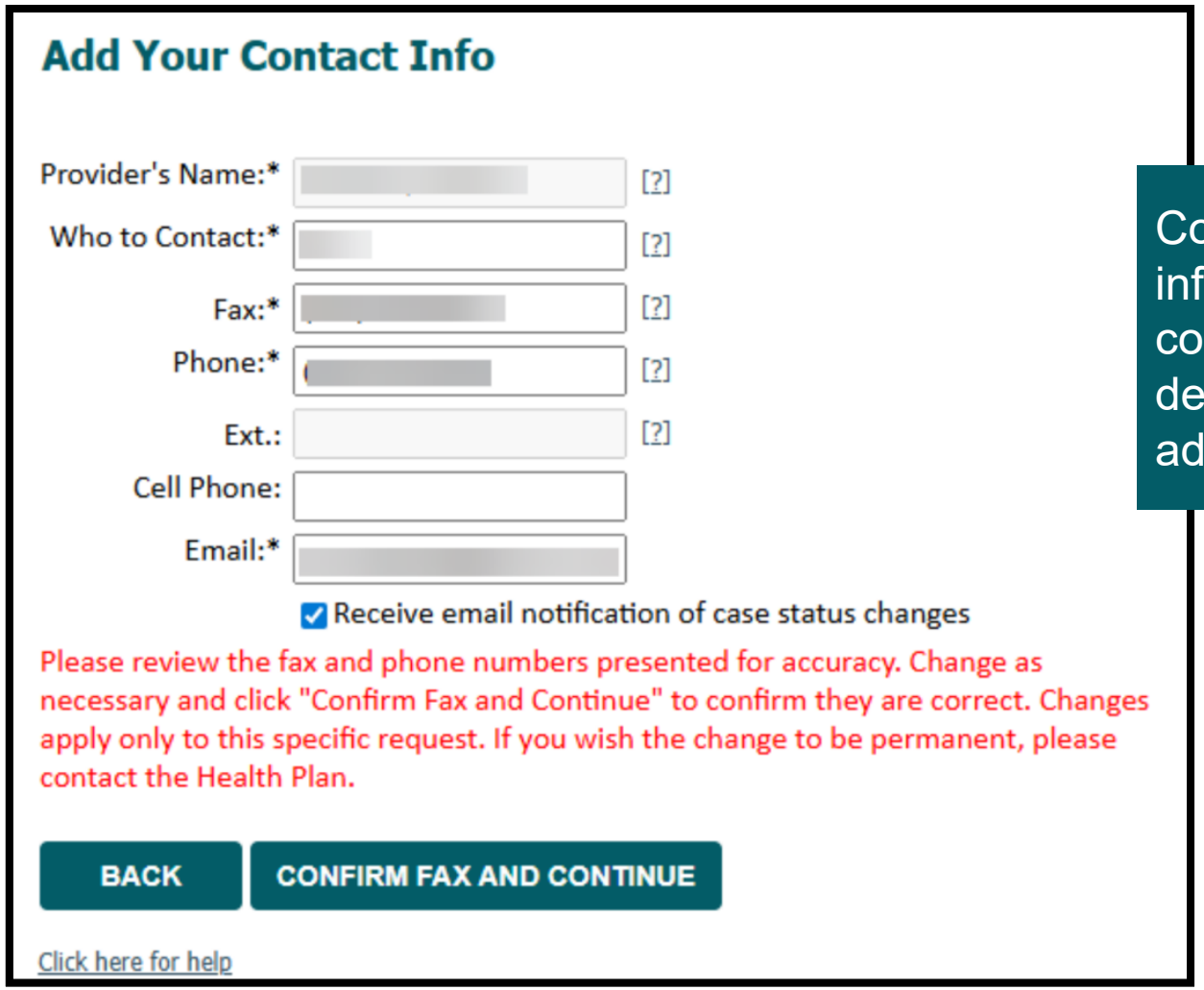
Provider Experience – Case Submission



Confirm or enter contact information to ensure smooth communication of the determination or to request additional information as needed.

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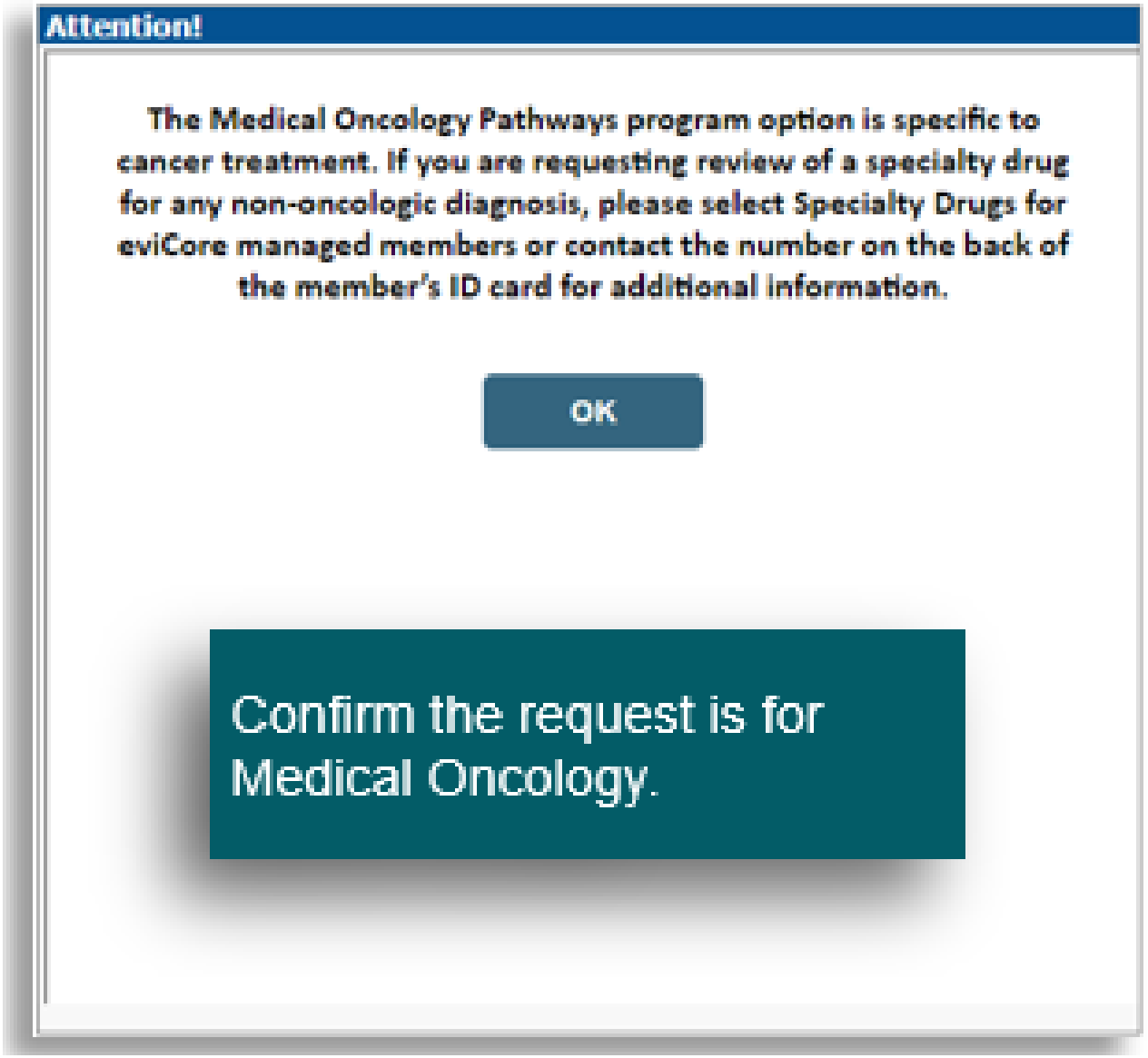
Provider Experience – Medical Oncology Case Submission



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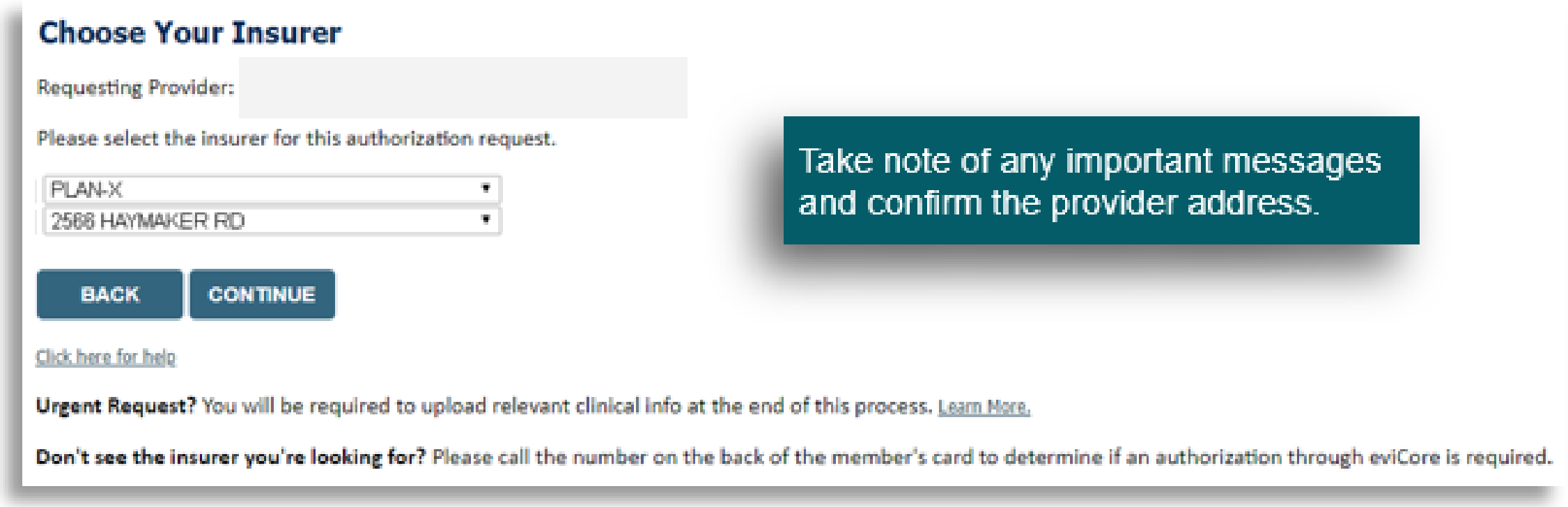
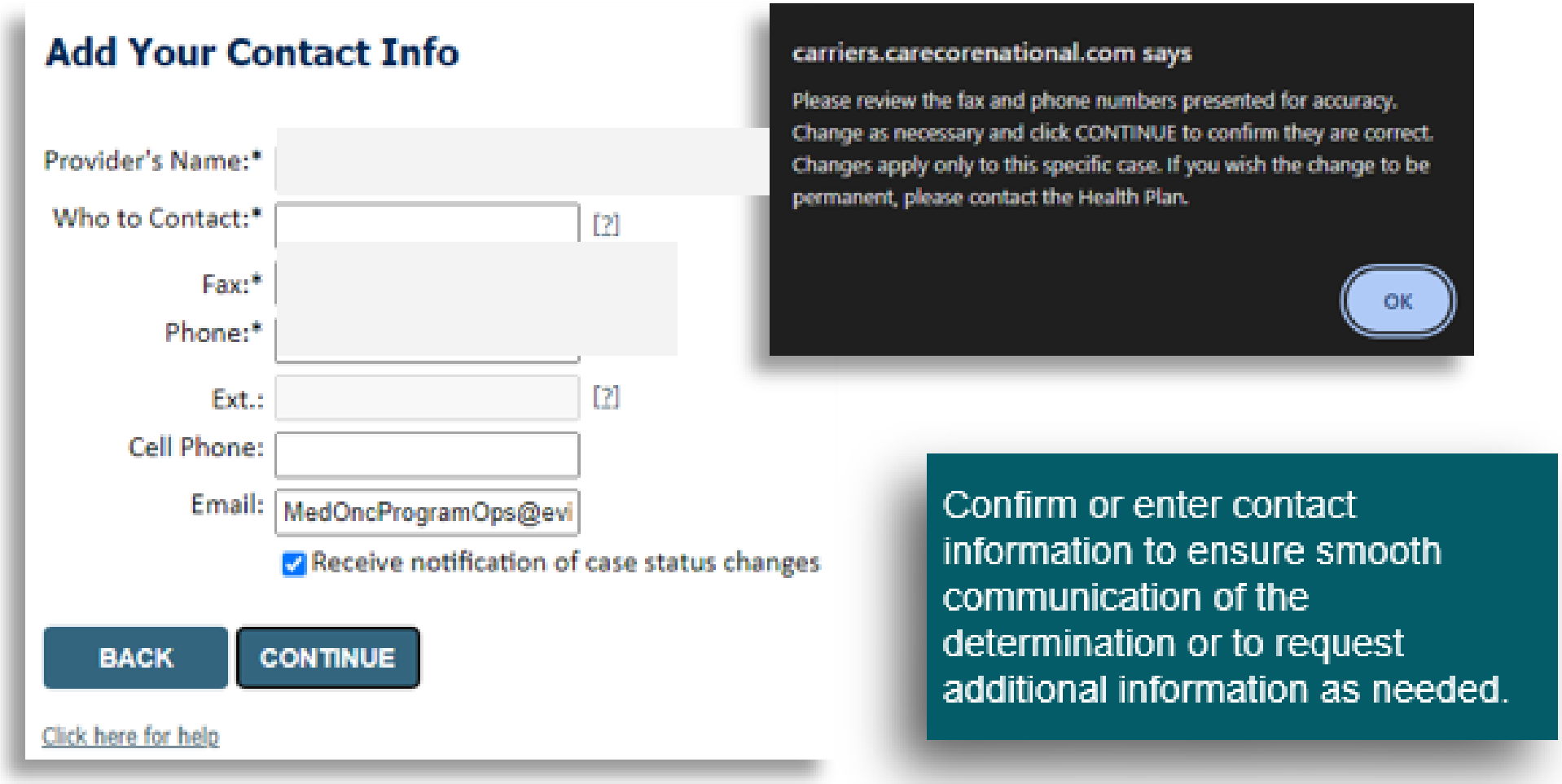
Provider Experience – Medical Oncology Case Submission



Take note of any important messages and confirm the provider address.

Provider Experience – Medical Oncology Case Submission



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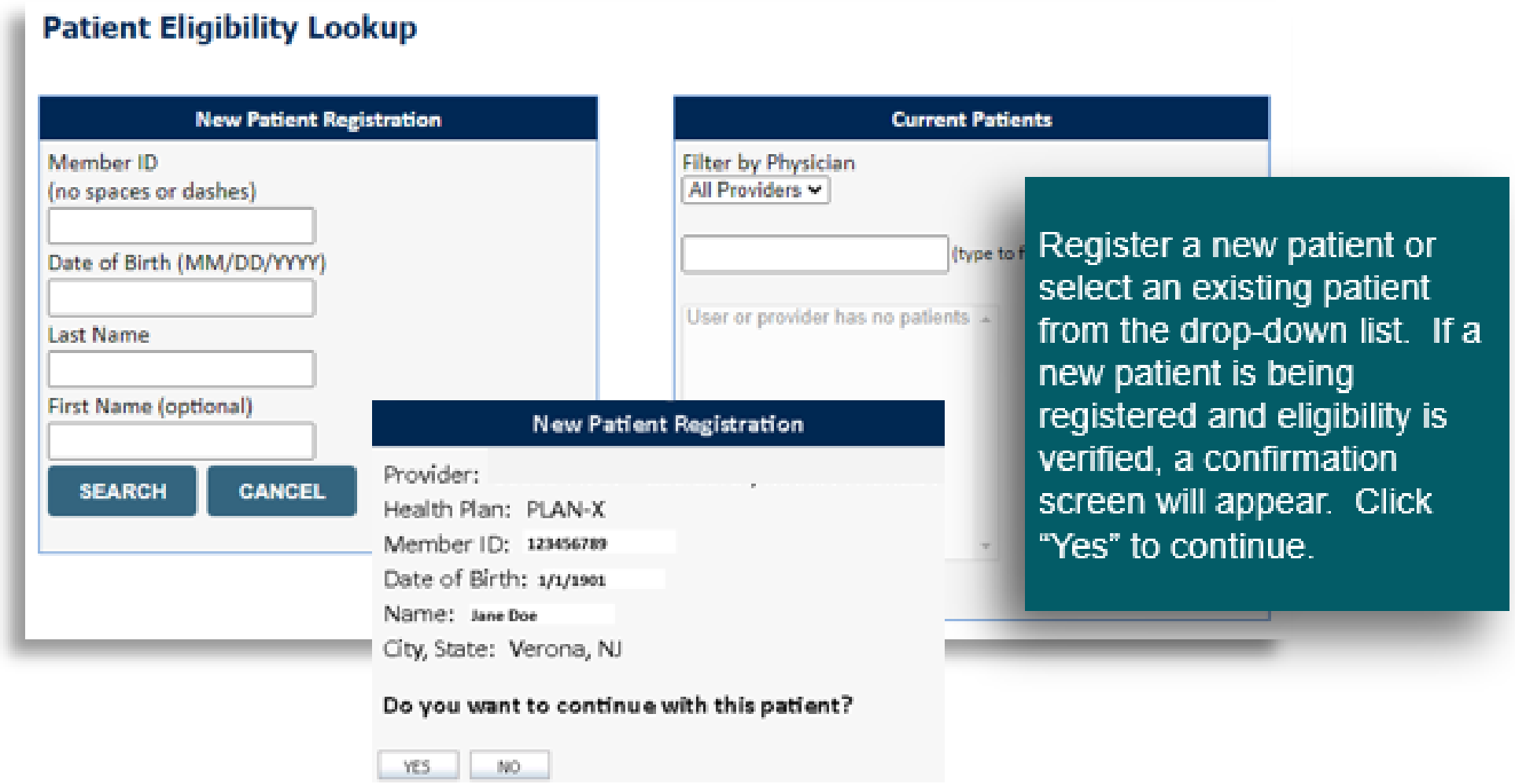
Provider Experience – Medical Oncology Case Submission



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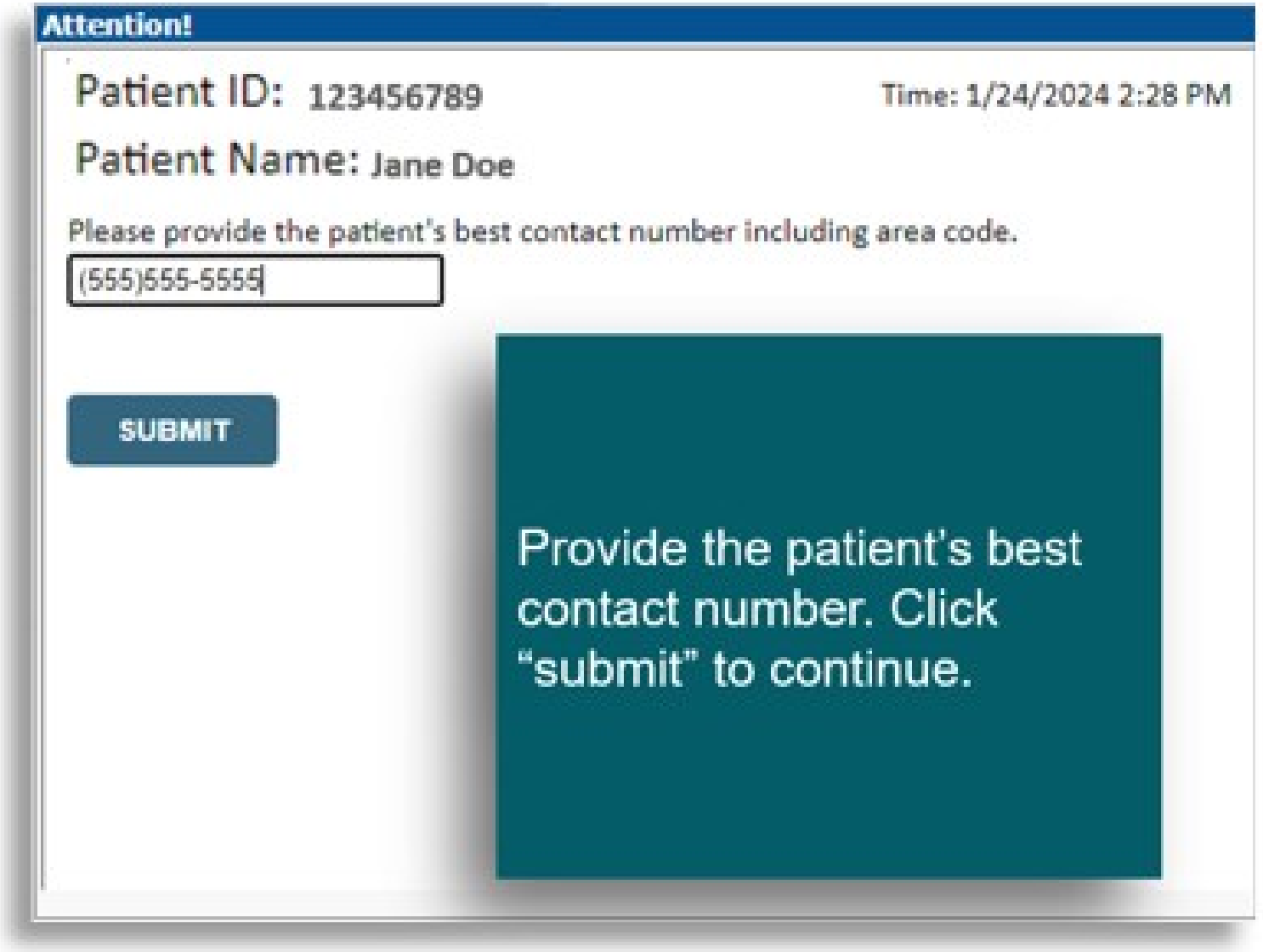
Provider Experience – Medical Oncology Case Submission



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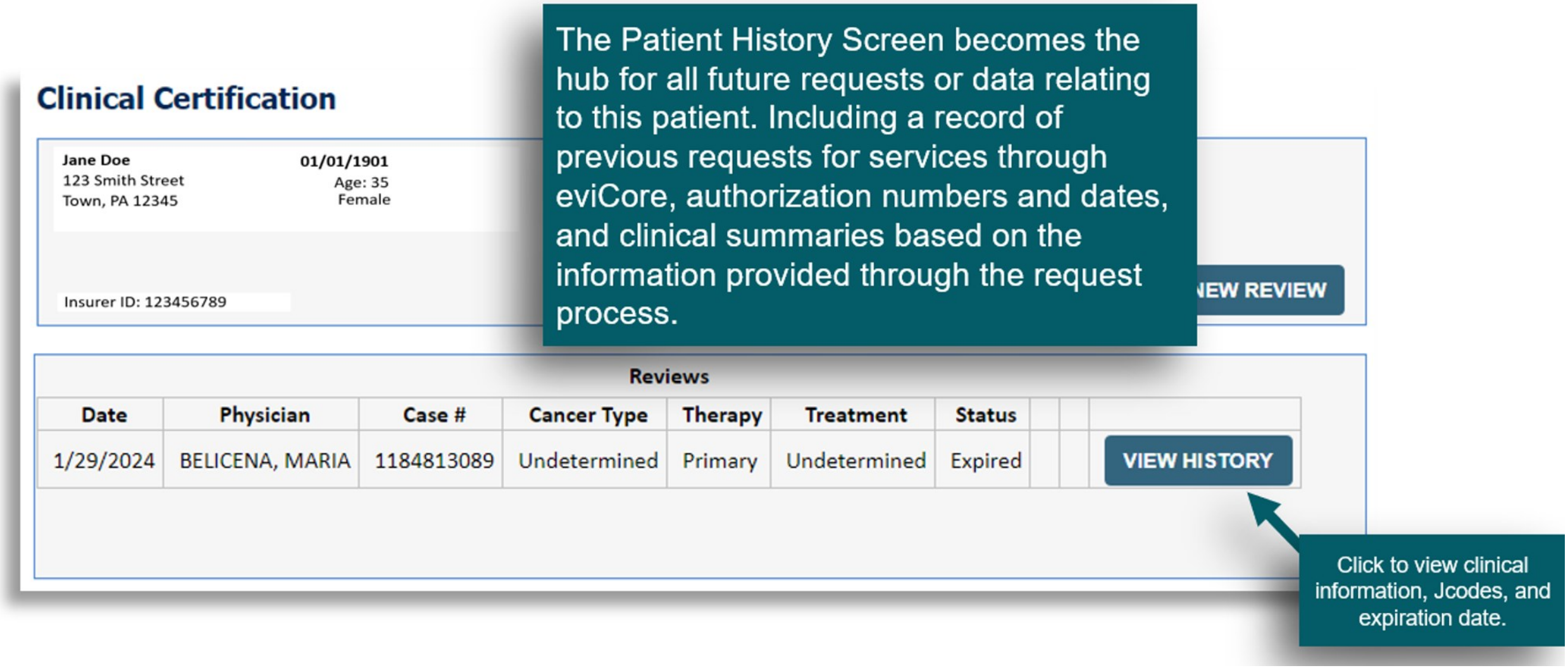

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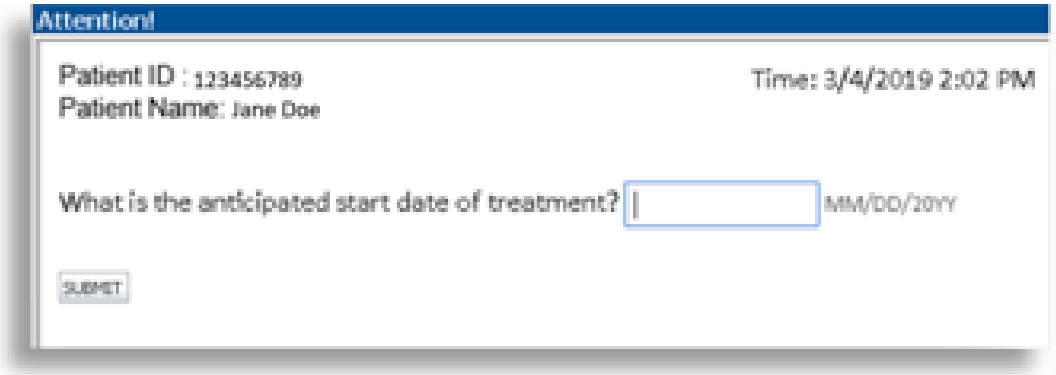
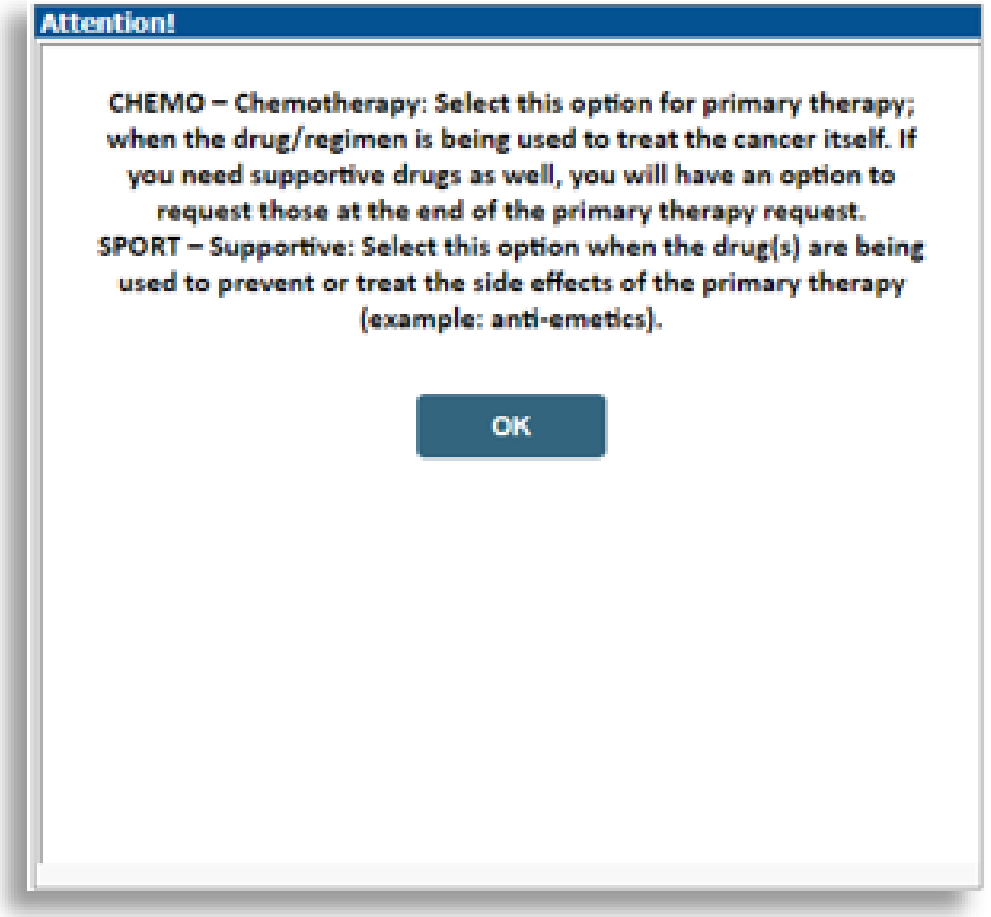


Enter:
Start Date of Treatment
Take note of important message describing CHEMO and SPORT.



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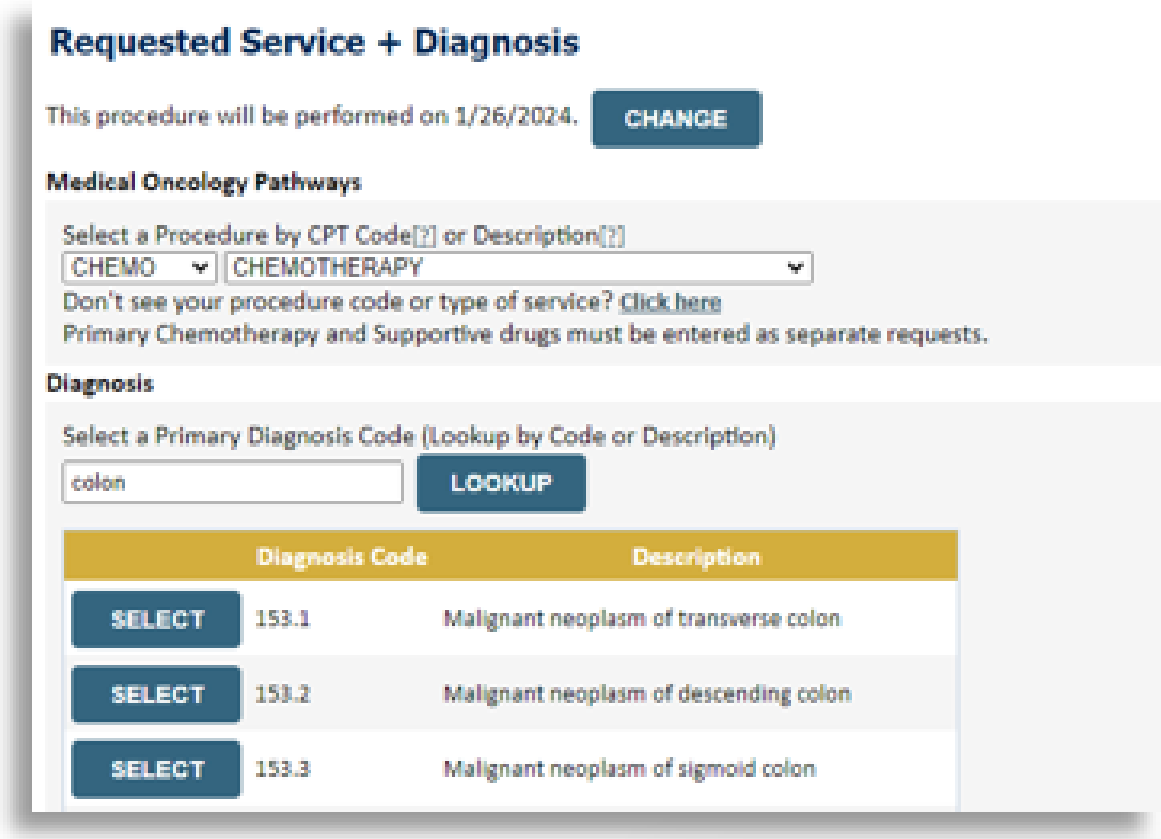
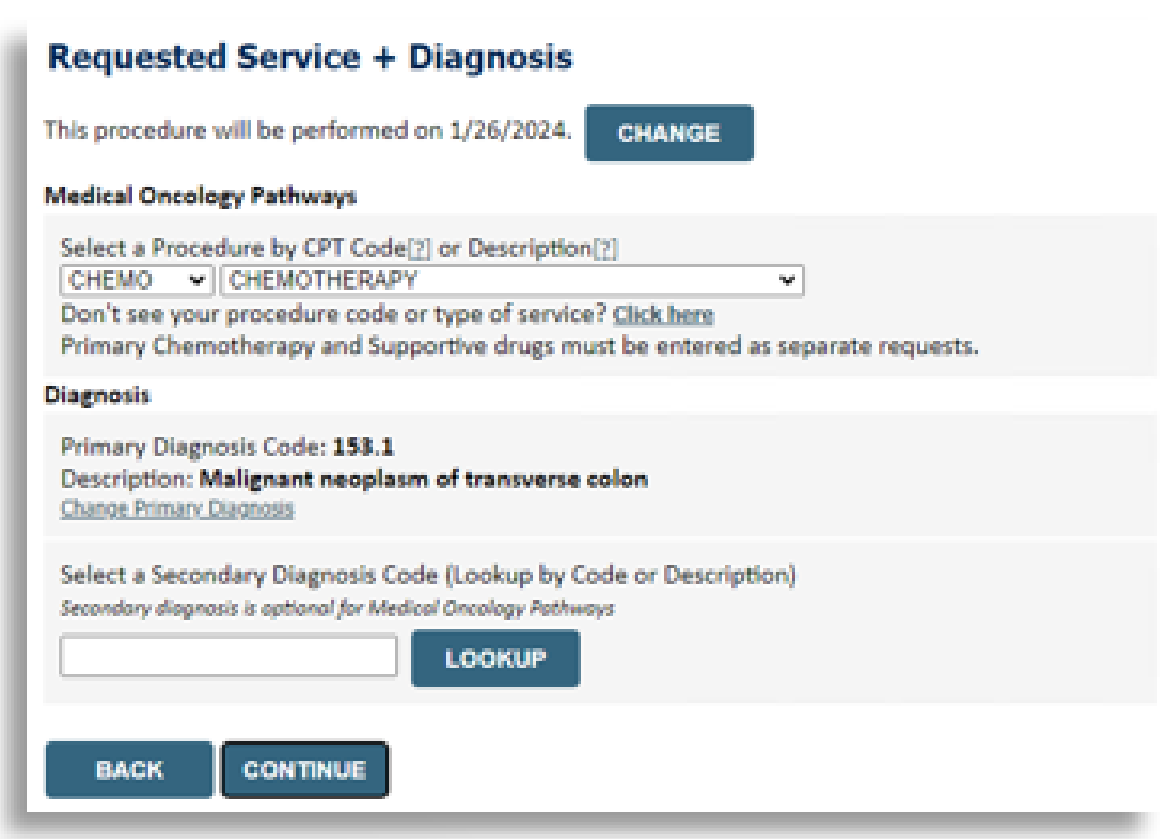
Provider Experience – Medical Oncology Case Submission





Select ICD10 by entering code or description.
Select "Continue".

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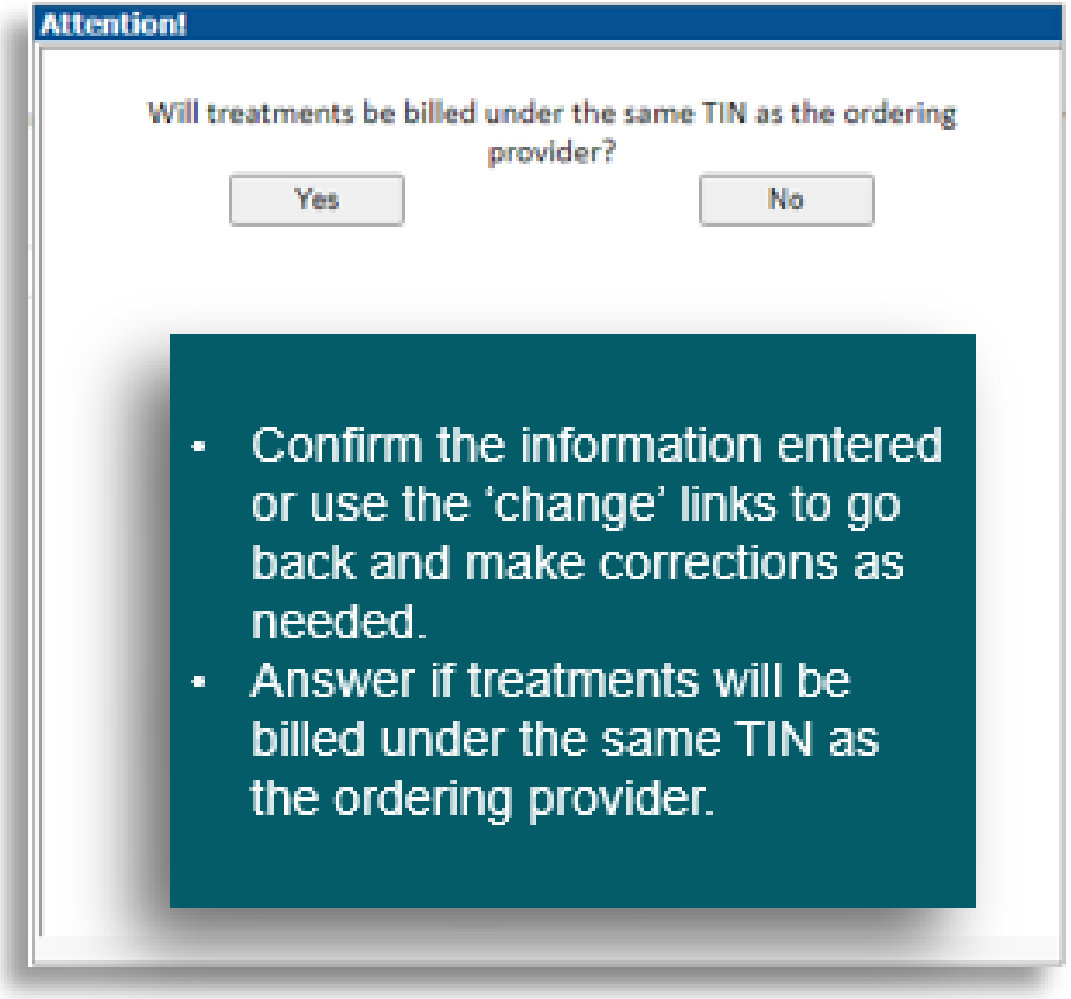

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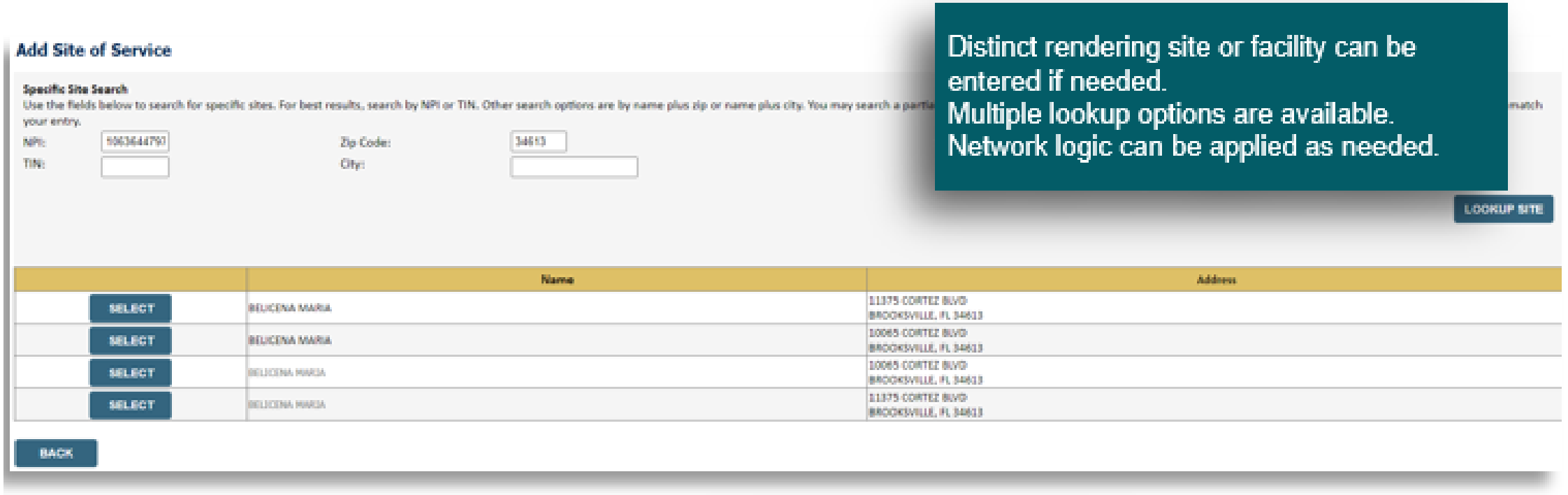

Distinct rendering site or facility can be entered if needed.
Multiple lookup options are available.
Network logic can be applied as needed.

Enter an email for communication if desired.

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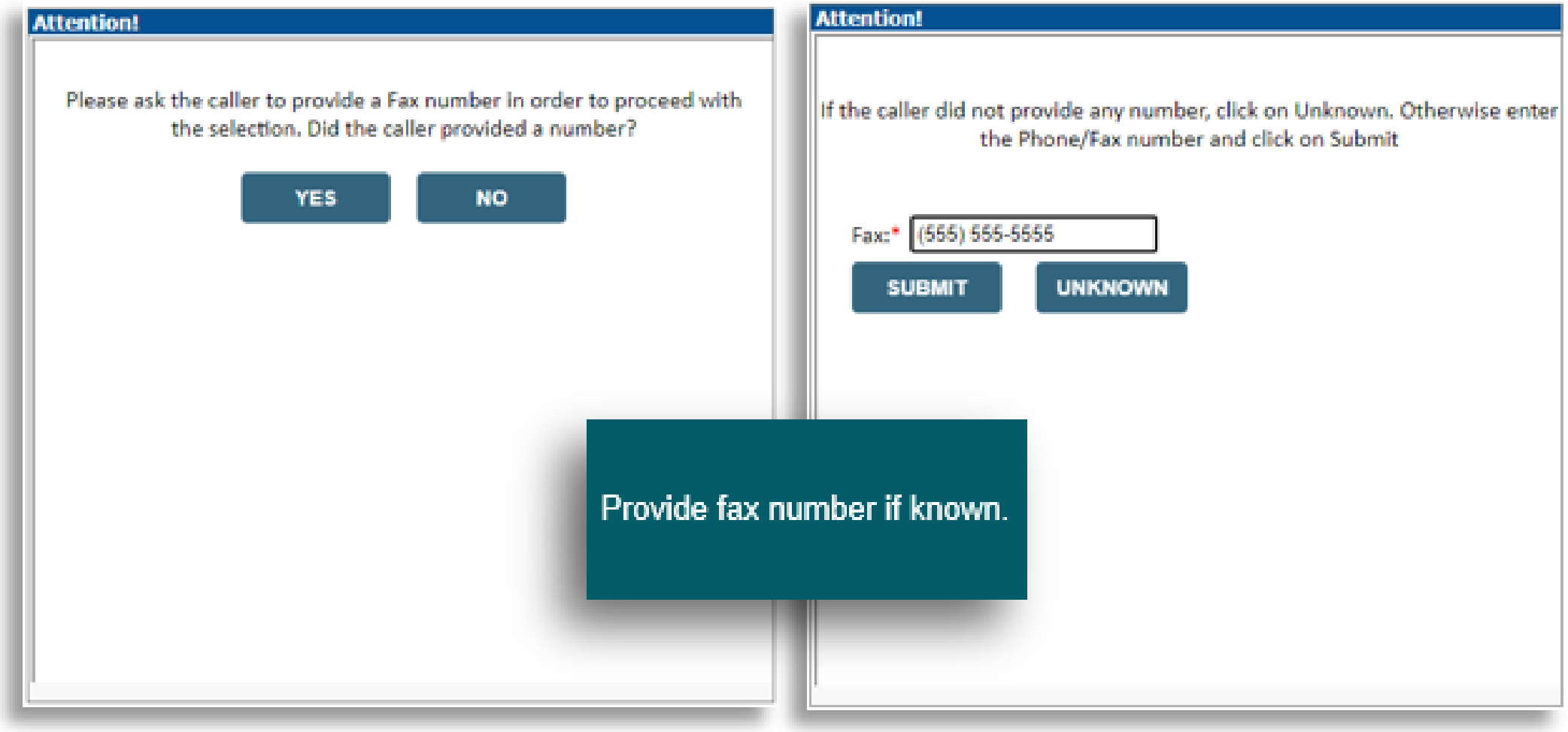
Provider Experience – Medical Oncology Case Submission



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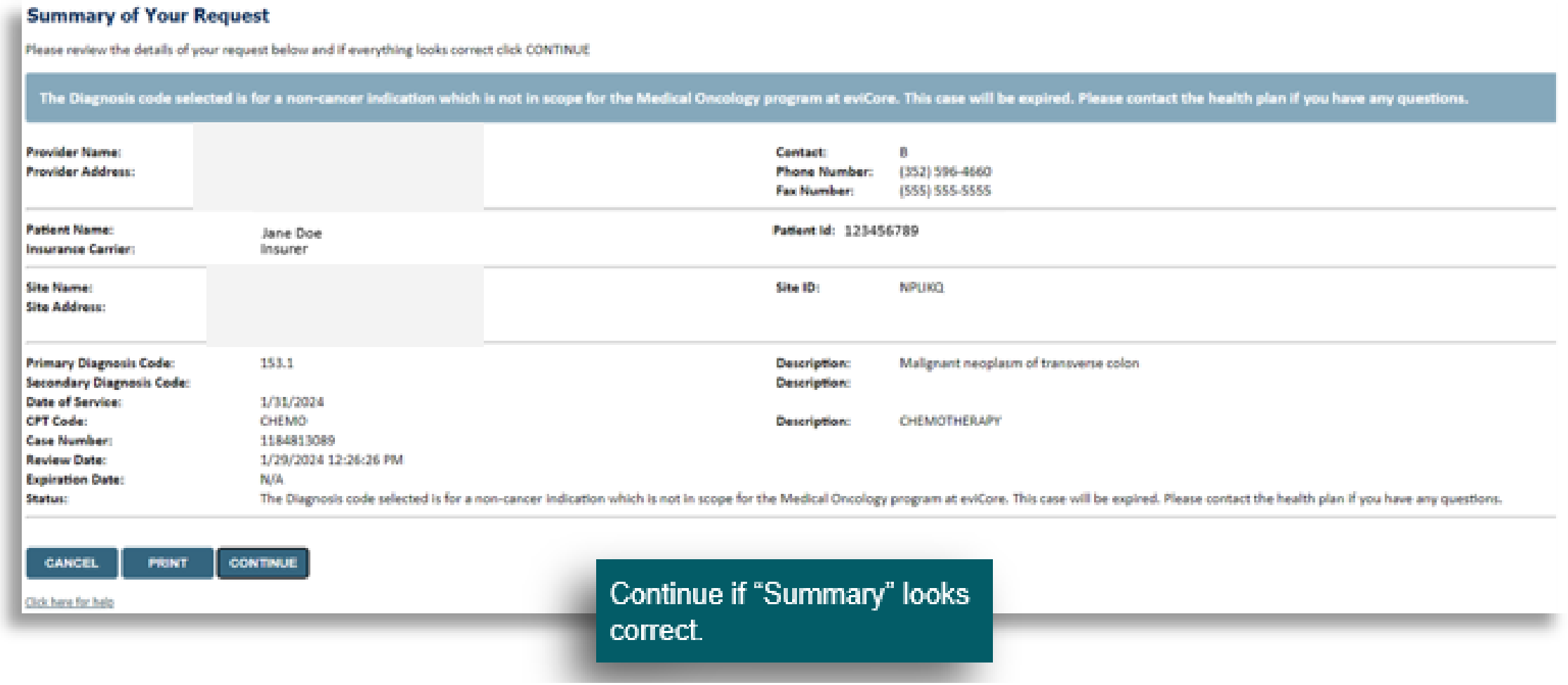
Provider Experience – Medical Oncology Case Submission



Summary of Your Request

Please review the details of your request below and if everything looks correct click CONTINUE

The Diagnosis code selected is for a non-cancer indication which is not in scope for the Medical Oncology program at eviCore. This case will be expired. Please contact the health plan if you have any questions.

Provider Name:		**Contact:**	B
Provider Address:		**Phone Number:**	(352) 596-4660
		Fax Number:	(555) 555-5555
Patient Name:	Jane Doe	**Patient Id:**	123456789
Insurance Carrier:	Insurer		
Site Name:		**Site ID:**	NPUKQ
Site Address:			
Primary Diagnosis Code:	153.1	**Description:**	Malignant neoplasm of transverse colon
Secondary Diagnosis Code:		**Description:**	
Date of Service:	1/31/2024		
CPT Code:	CHEMO	**Description:**	CHEMOTHERAPY
Case Number:	1184813089		
Review Date:	1/29/2024 12:26:26 PM		
Expiration Date:	N/A		
Status:	The Diagnosis code selected is for a non-cancer indication which is not in scope for the Medical Oncology program at eviCore. This case will be expired. Please contact the health plan if you have any questions.		

CANCEL PRINT CONTINUE

Click here for help

Continue if "Summary" looks correct.

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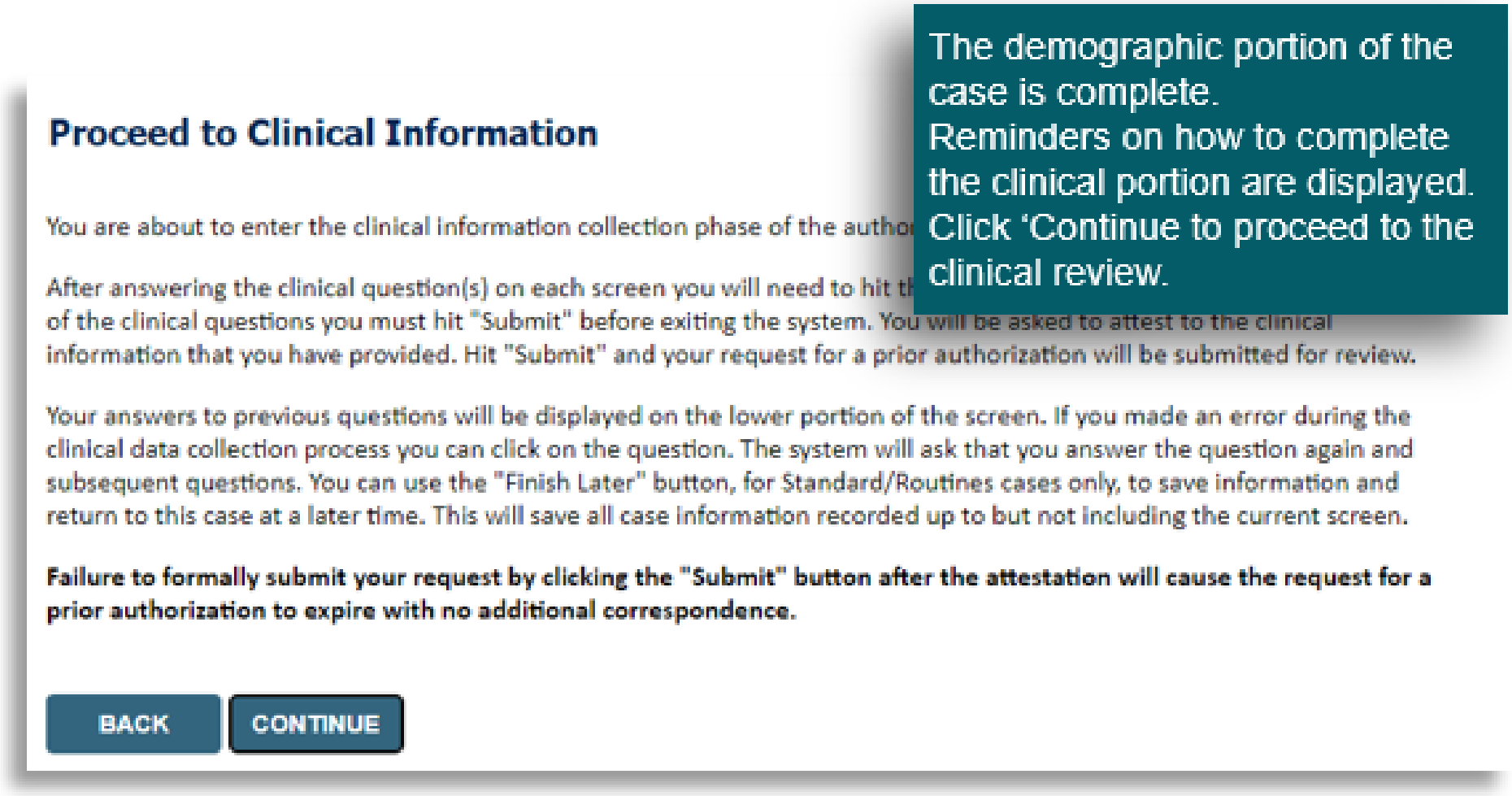
Provider Experience – Medical Oncology Case Submission



The demographic portion of the case is complete.
Reminders on how to complete the clinical portion are displayed.
Click 'Continue to proceed to the clinical review.

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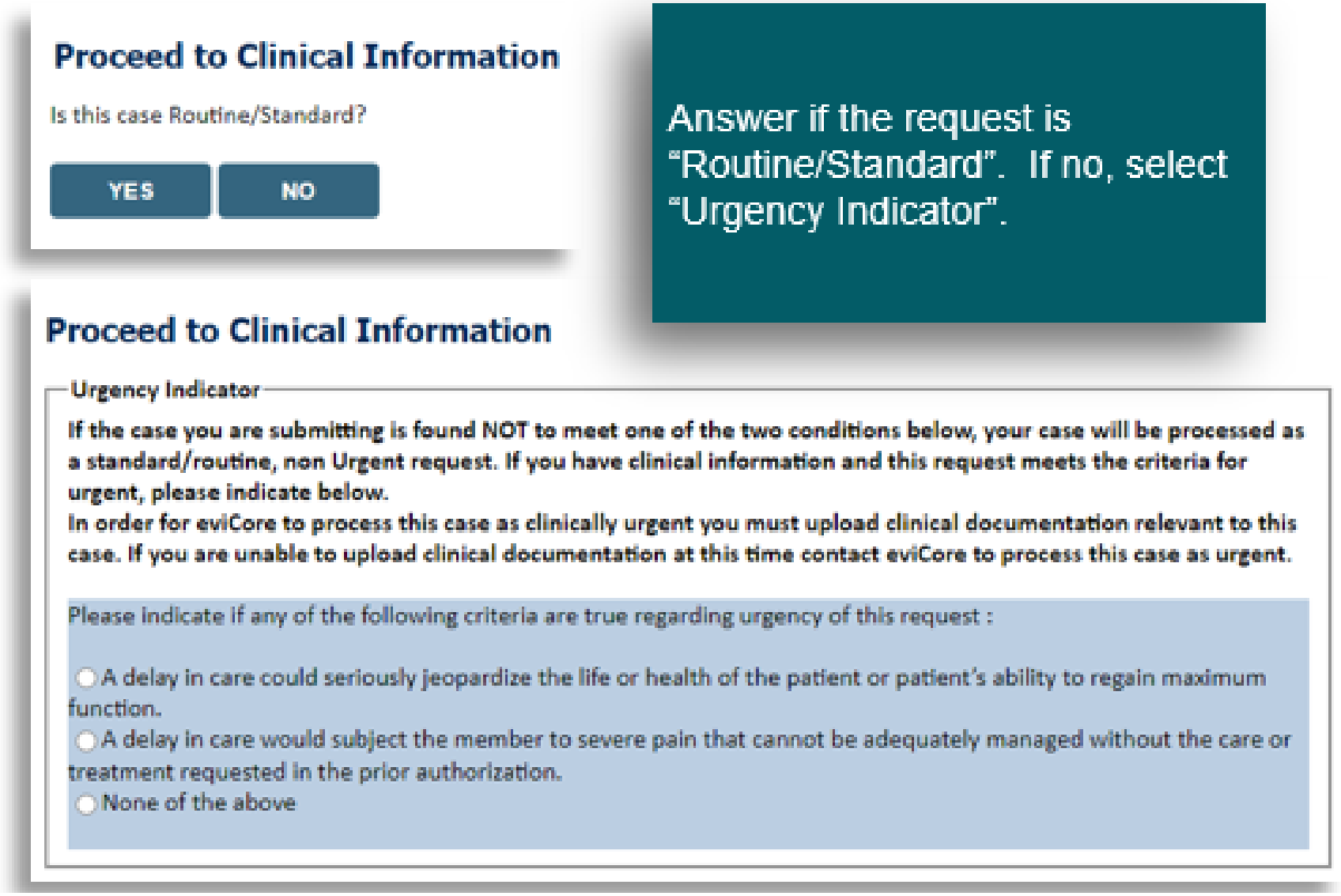
Provider Experience – Medical Oncology Case Submission



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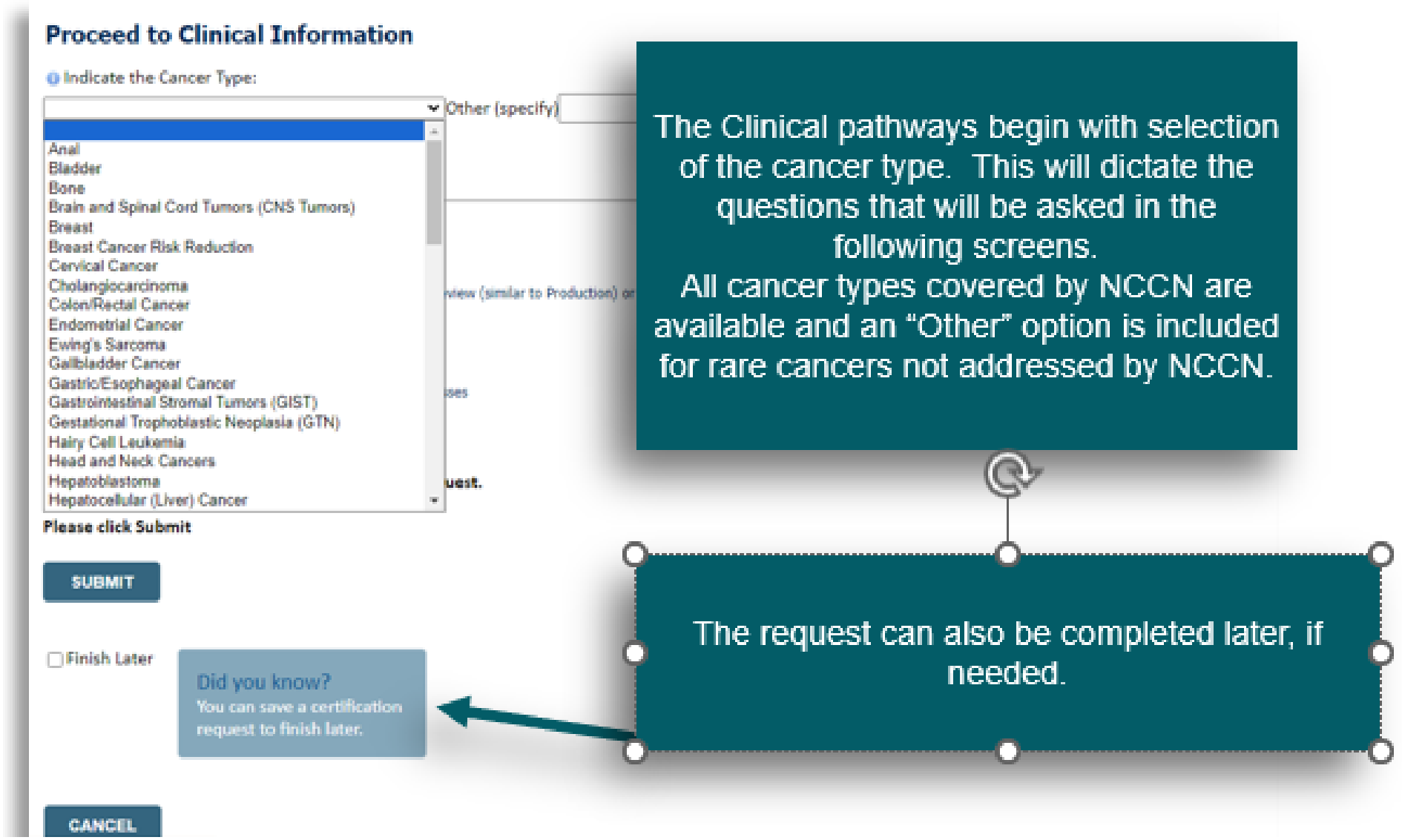
Provider Experience – Medical Oncology Case Submission



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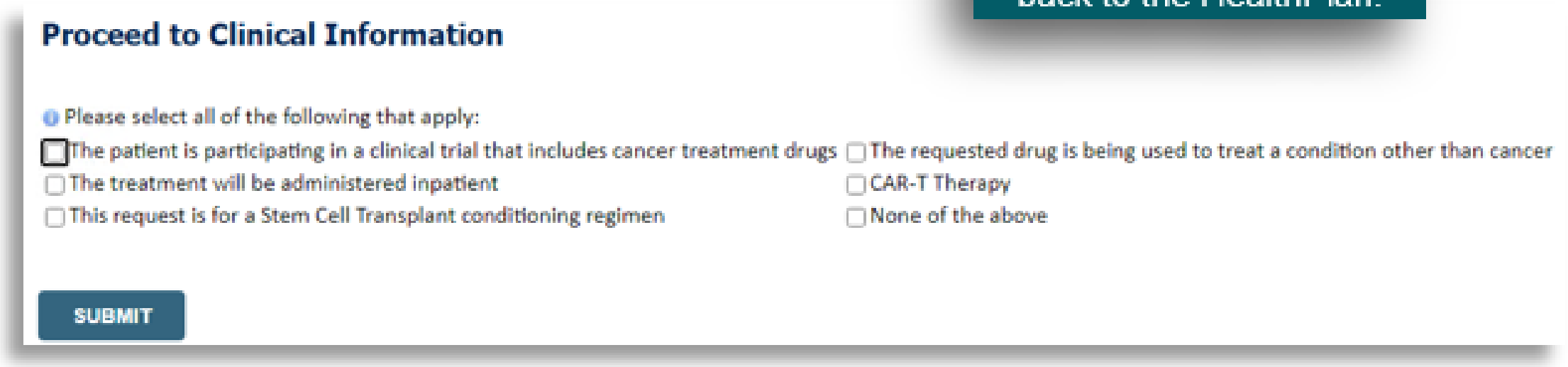
Provider Experience – Medical Oncology Case Submission

Confirm any exclusions, which may direct the user back to the HealthPlan.



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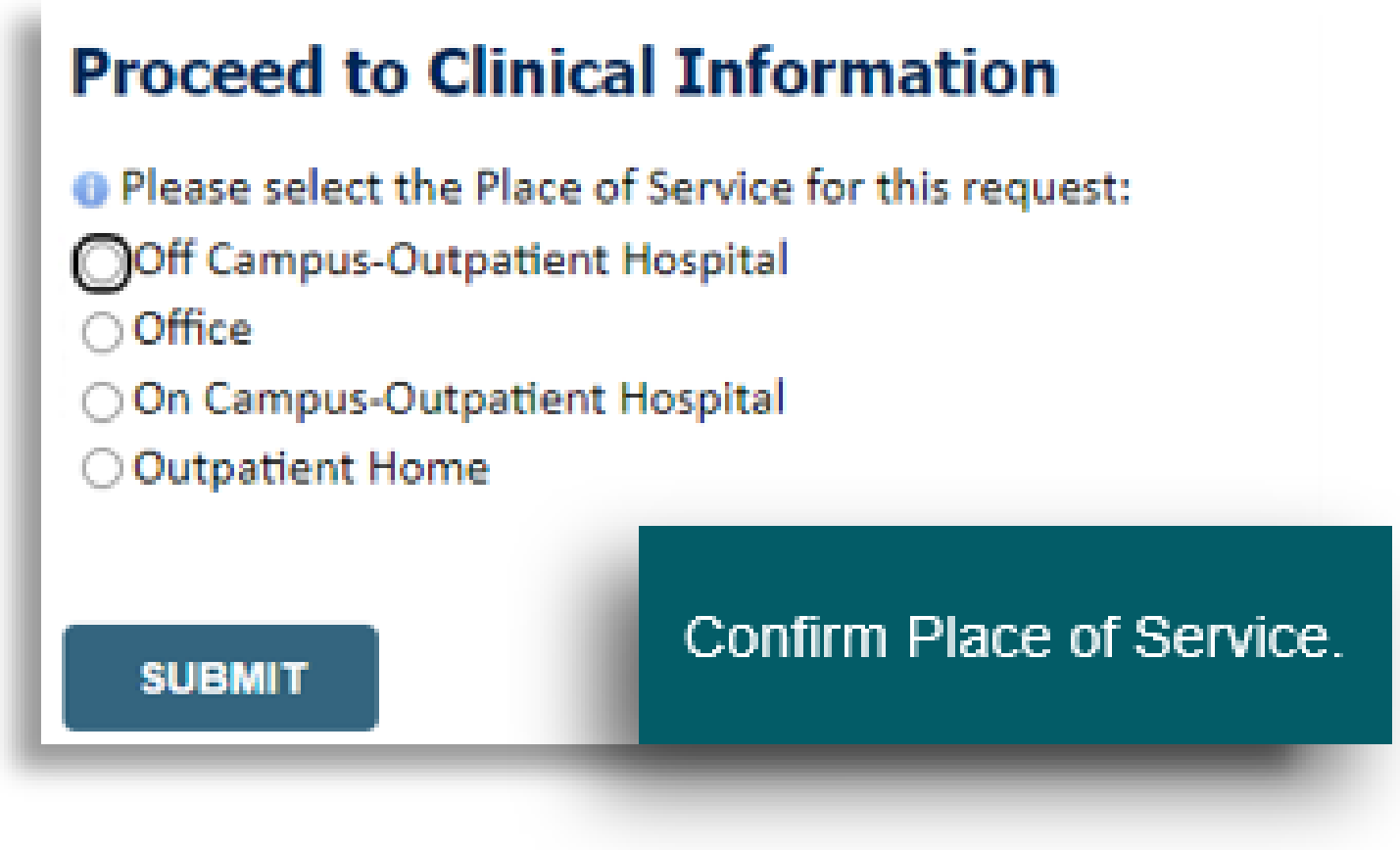
Provider Experience – Medical Oncology Case Submission



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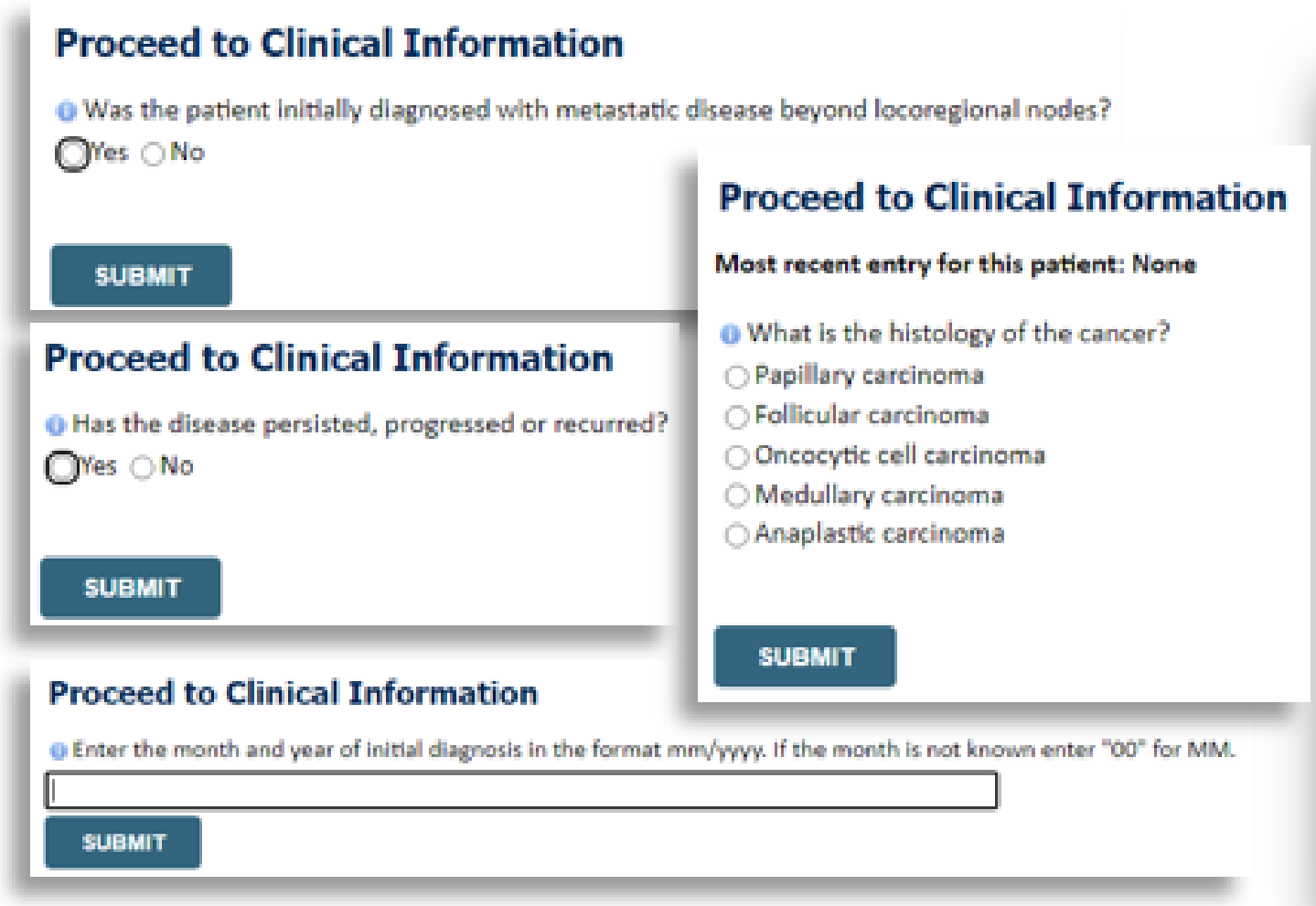
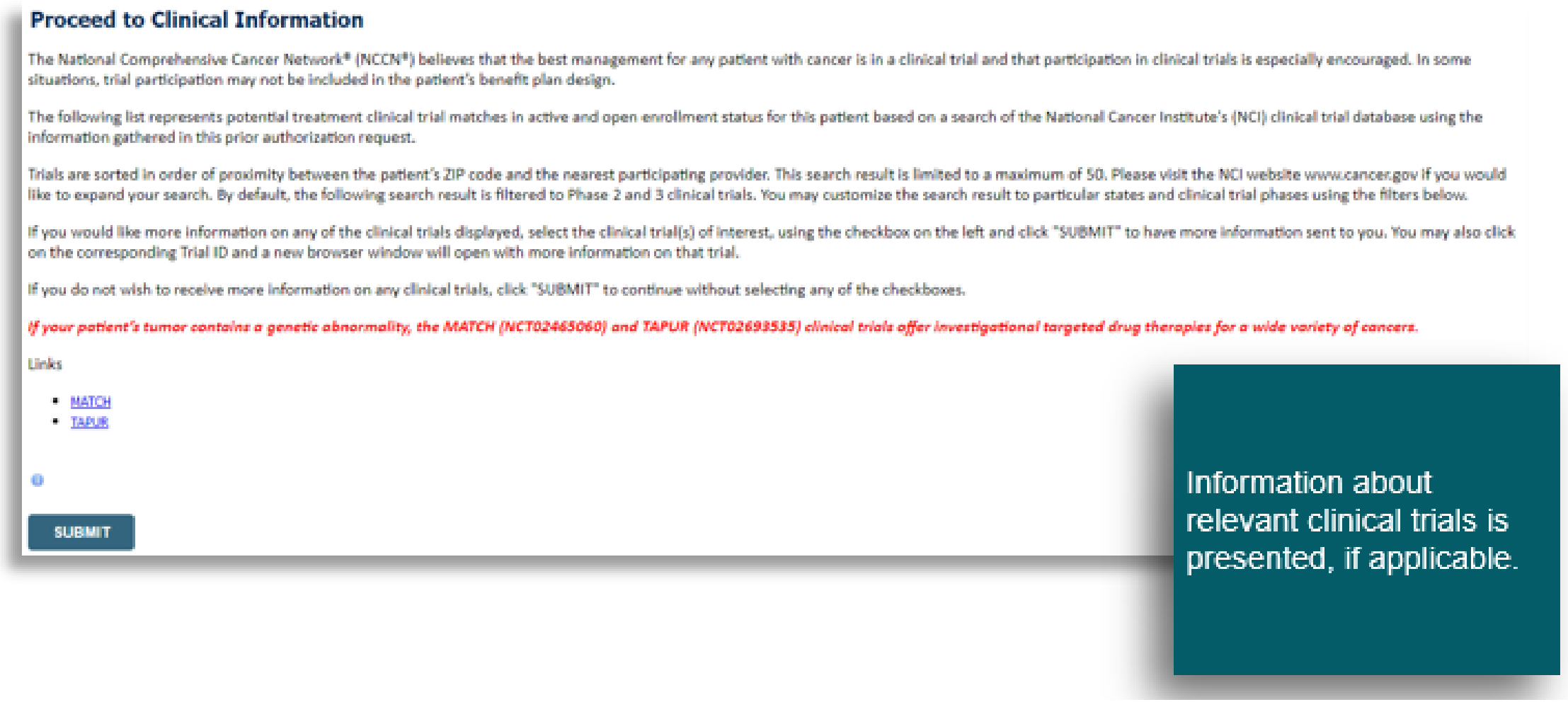
Provider Experience – Medical Oncology Case Submission



The office user will be asked a series of questions necessary to generate the recommended treatment list for the patient being treated. A typical traversal will have between 5 and 12 questions based on the complexity of the cancer. The system will dynamically filter to only the minimum number of questions needed to complete the review.
Almost all answers are in drop down or click selection to allow for quick entry and structured data for reporting and analysis.

Provider Experience – Medical Oncology Case Submission



Information about relevant clinical trials is presented, if applicable.

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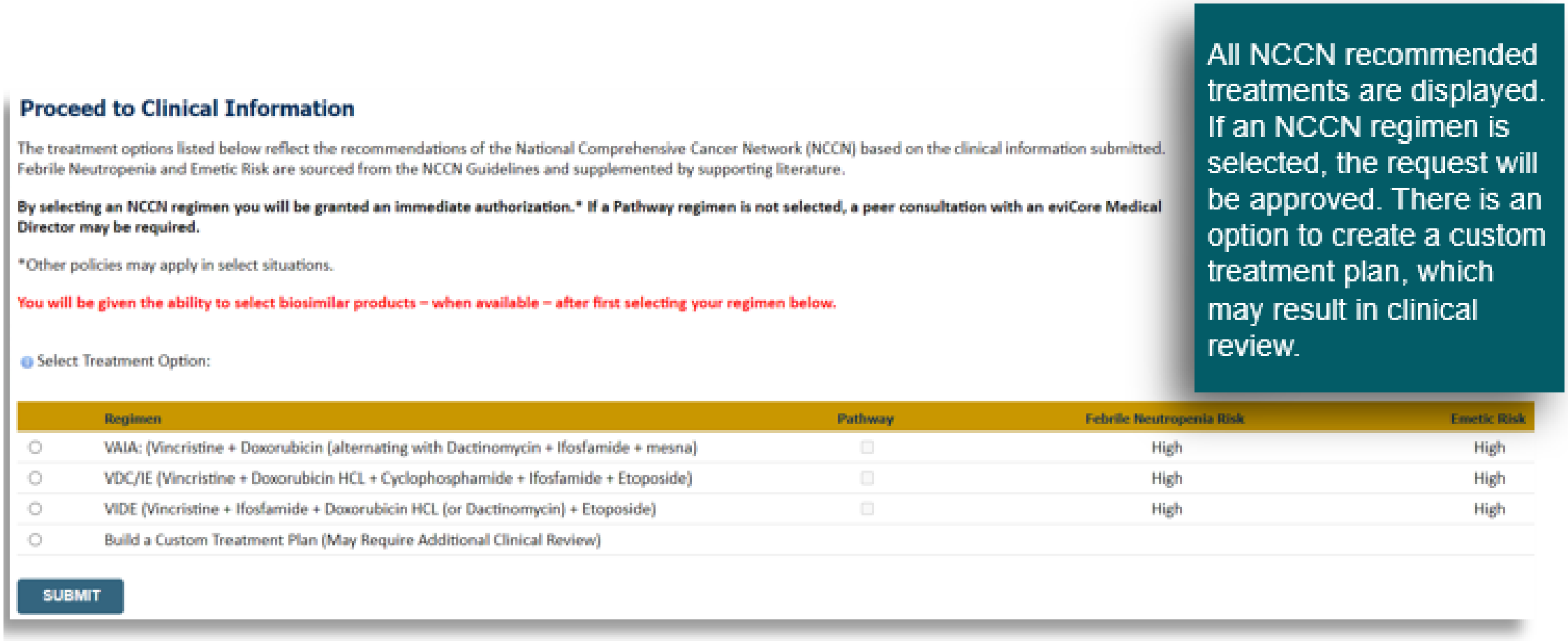
Provider Experience – Medical Oncology Case Submission



Proceed to Clinical Information

The treatment options listed below reflect the recommendations of the National Comprehensive Cancer Network (NCCN) based on the clinical information submitted. Febrile Neutropenia and Emetic Risk are sourced from the NCCN Guidelines and supplemented by supporting literature.

By selecting an NCCN regimen you will be granted an immediate authorization.* If a Pathway regimen is not selected, a peer consultation with an eviCore Medical Director may be required.

*Other policies may apply in select situations.

You will be given the ability to select biosimilar products – when available – after first selecting your regimen below.

Select Treatment Option:

	Regimen	Pathway	Febrile Neutropenia Risk	Emetic Risk
○	VAIA: (Vincristine + Doxorubicin (alternating with Dactinomycin + Ifosfamide + mesna)	☐	High	High
○	VDC/IE (Vincristine + Doxorubicin HCL + Cyclophosphamide + Ifosfamide + Etoposide)	☐	High	High
○	VIDE (Vincristine + Ifosfamide + Doxorubicin HCL (or Dactinomycin) + Etoposide)	☐	High	High
○	Build a Custom Treatment Plan (May Require Additional Clinical Review)			

SUBMIT

All NCCN recommended treatments are displayed. If an NCCN regimen is selected, the request will be approved. There is an option to create a custom treatment plan, which may result in clinical review.

The system is designed to managed injectable chemotherapy only or injectable + oral chemotherapy
This will be decided as part of the program design conversation.

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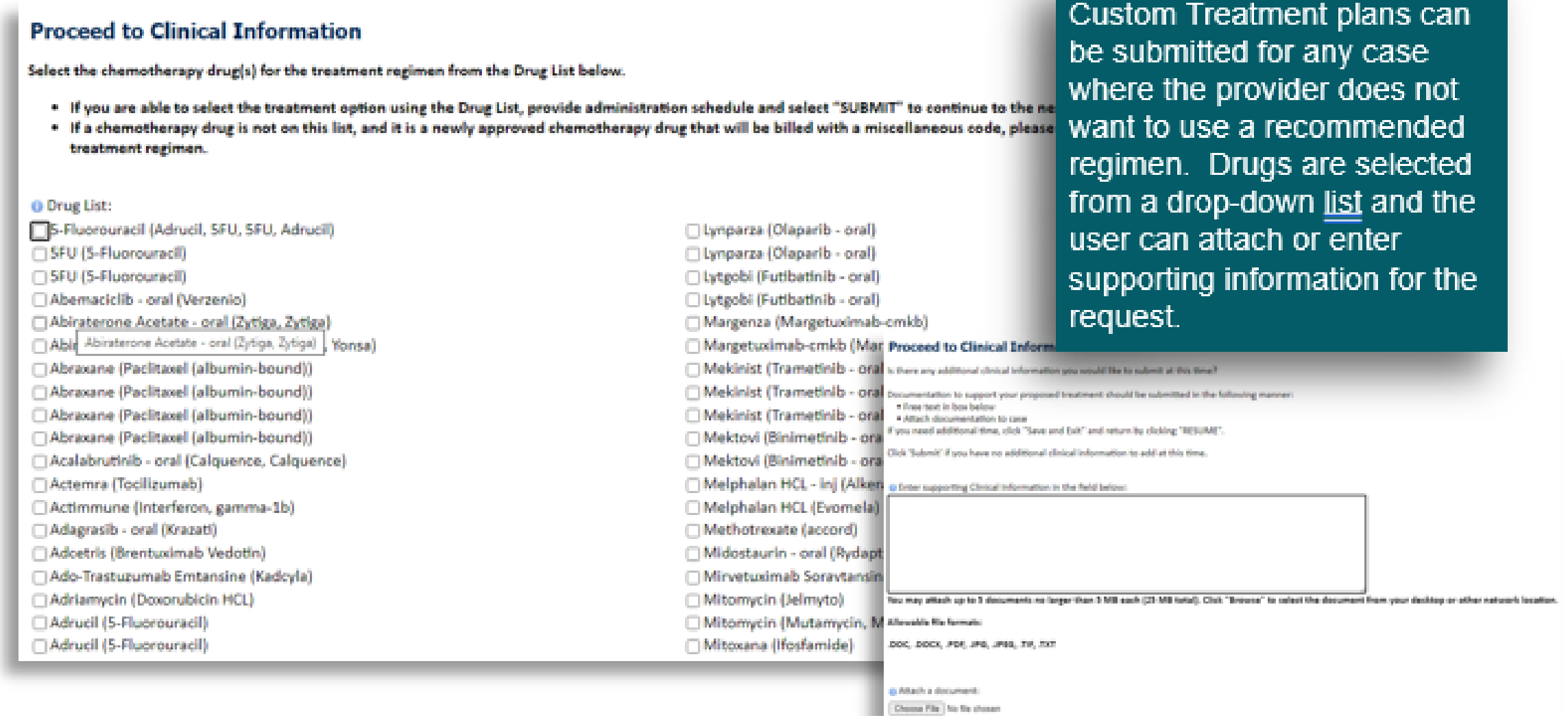
Provider Experience – Medical Oncology Case Submission



Custom Treatment plans can be submitted for any case where the provider does not want to use a recommended regimen. Drugs are selected from a drop-down list and the user can attach or enter supporting information for the request.

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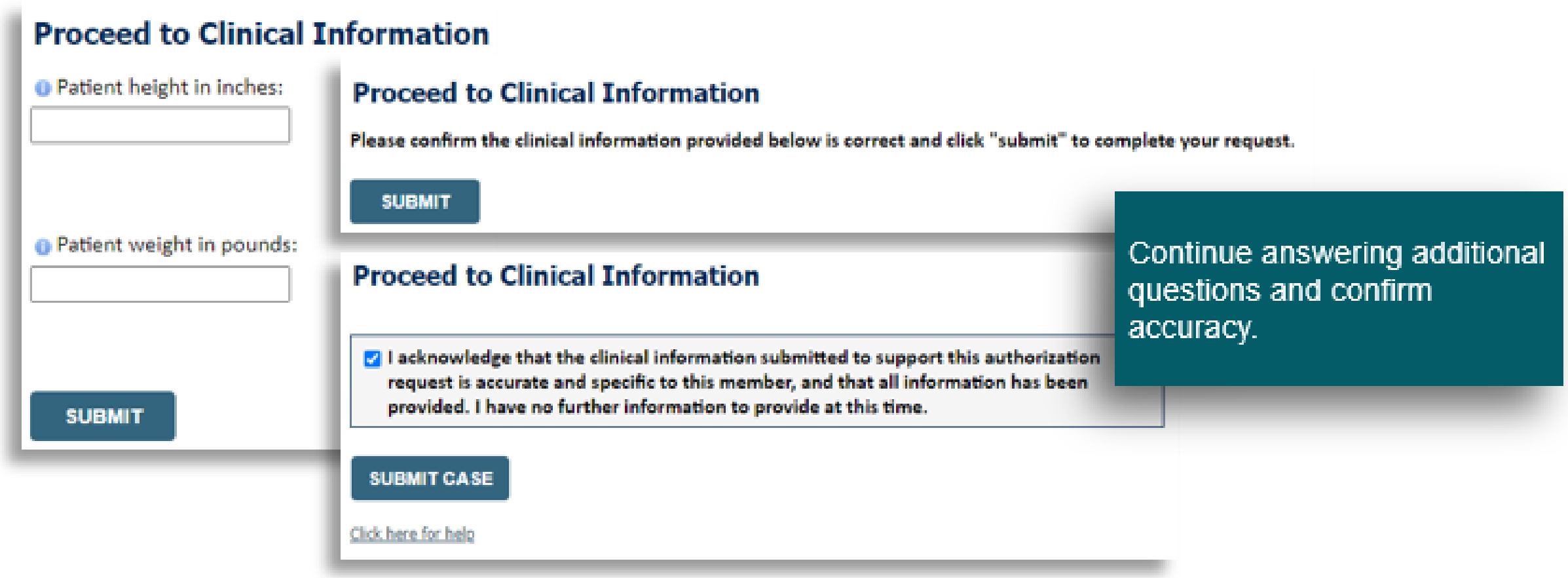
Provider Experience – Medical Oncology Case Submission



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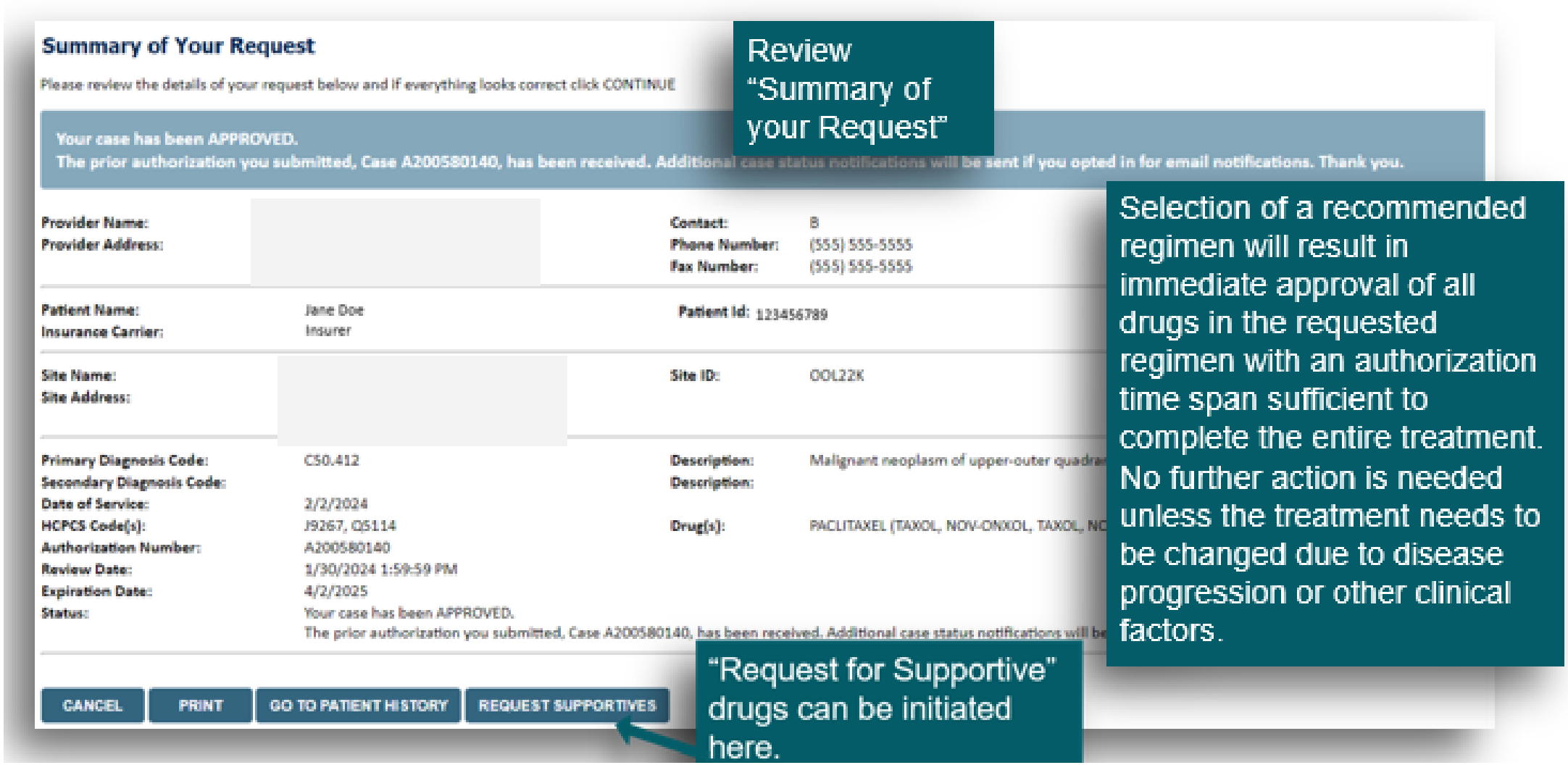
Provider Experience – Medical Oncology Case Submission



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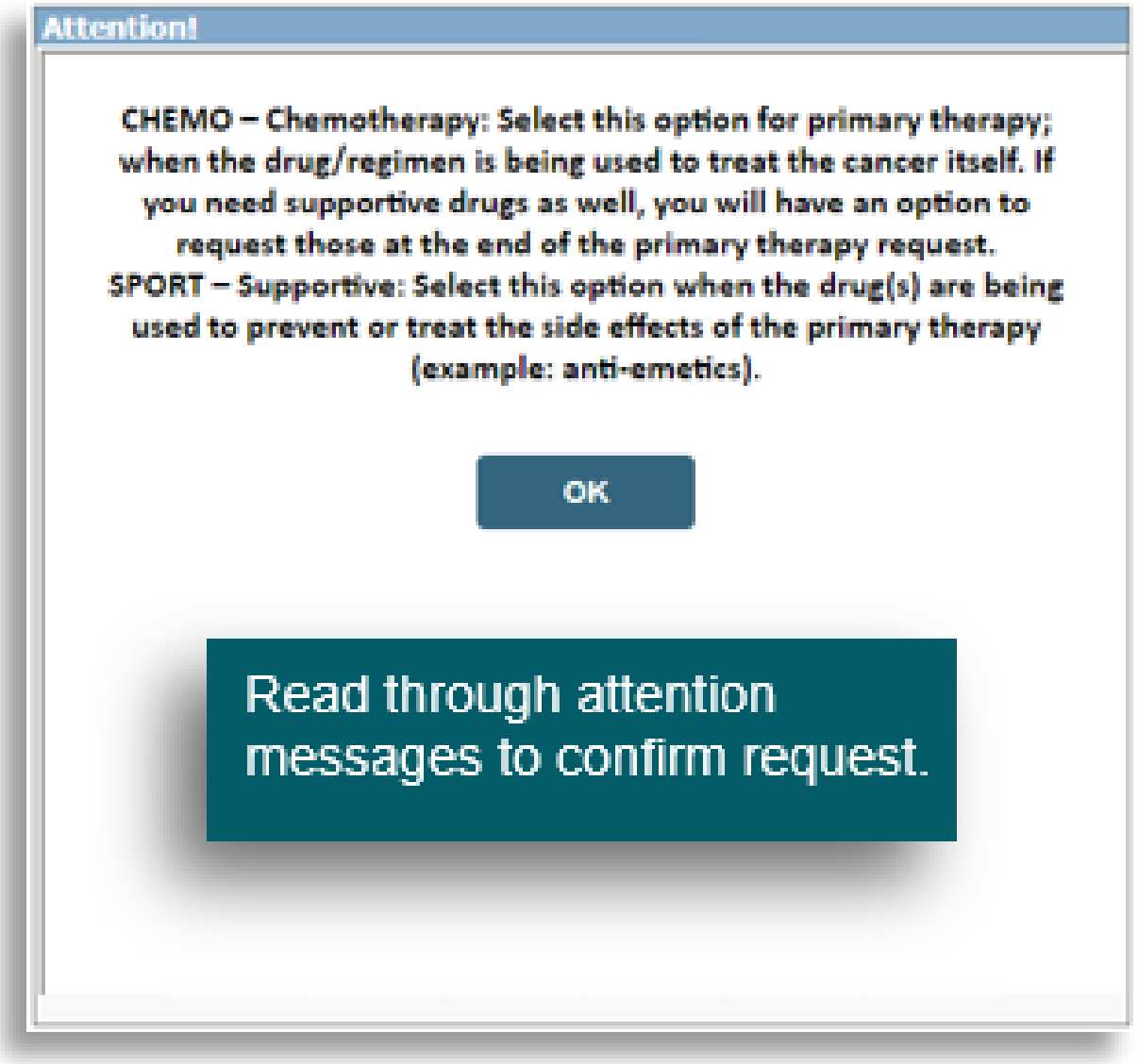
Provider Experience – Case Submission - Supportives



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Provider Experience – Case Submission - Supportives

If "Request Supportives" is selected, a new case is started, and the user is dropped on this screen to complete a supportive drug request.
The start date, drug classification, and ICD10 are prepopulated to match the Chemotherapy case.
Click Continue to proceed to the clinical portion of the request

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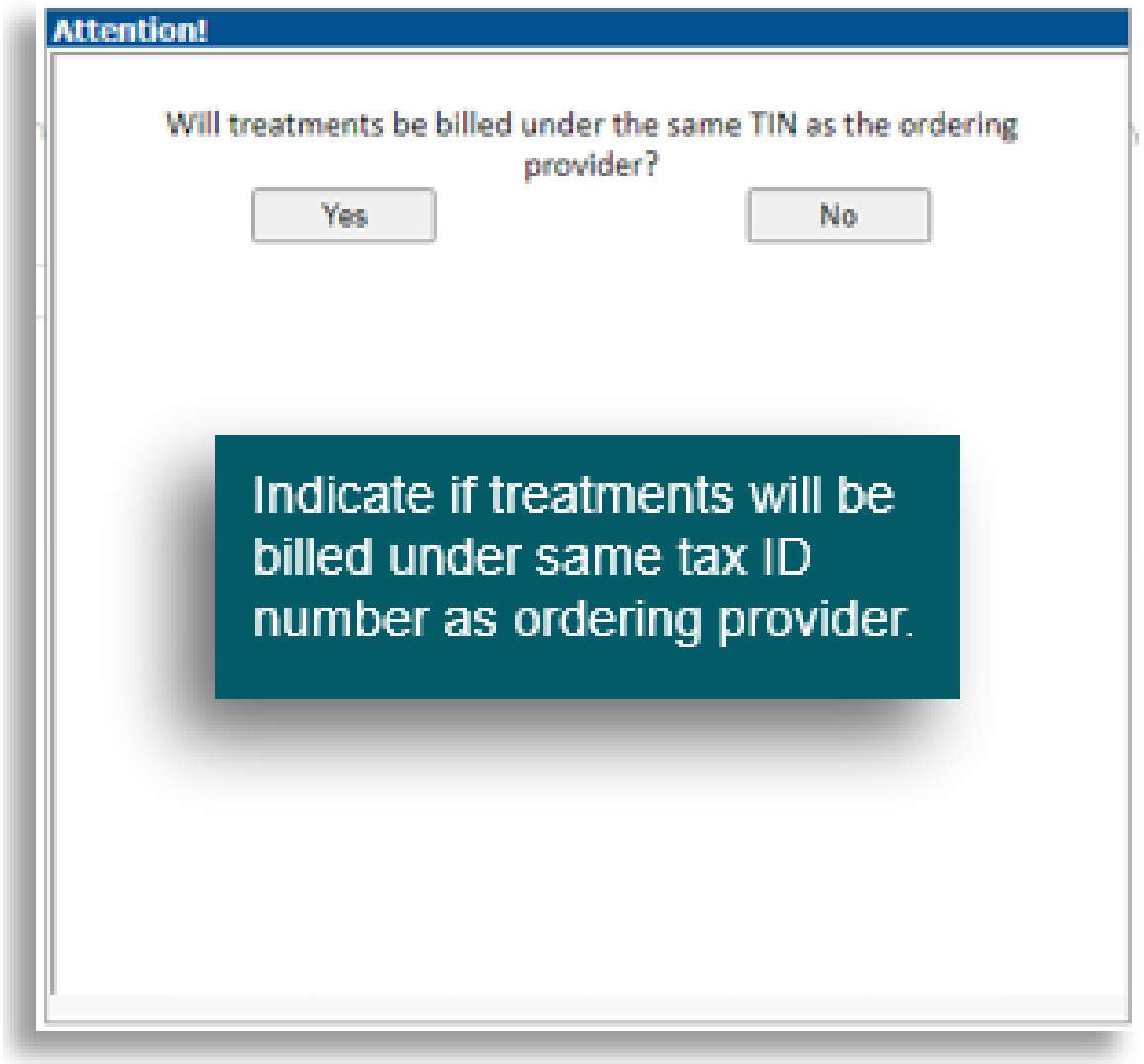
Provider Experience – Case Submission - Supportives



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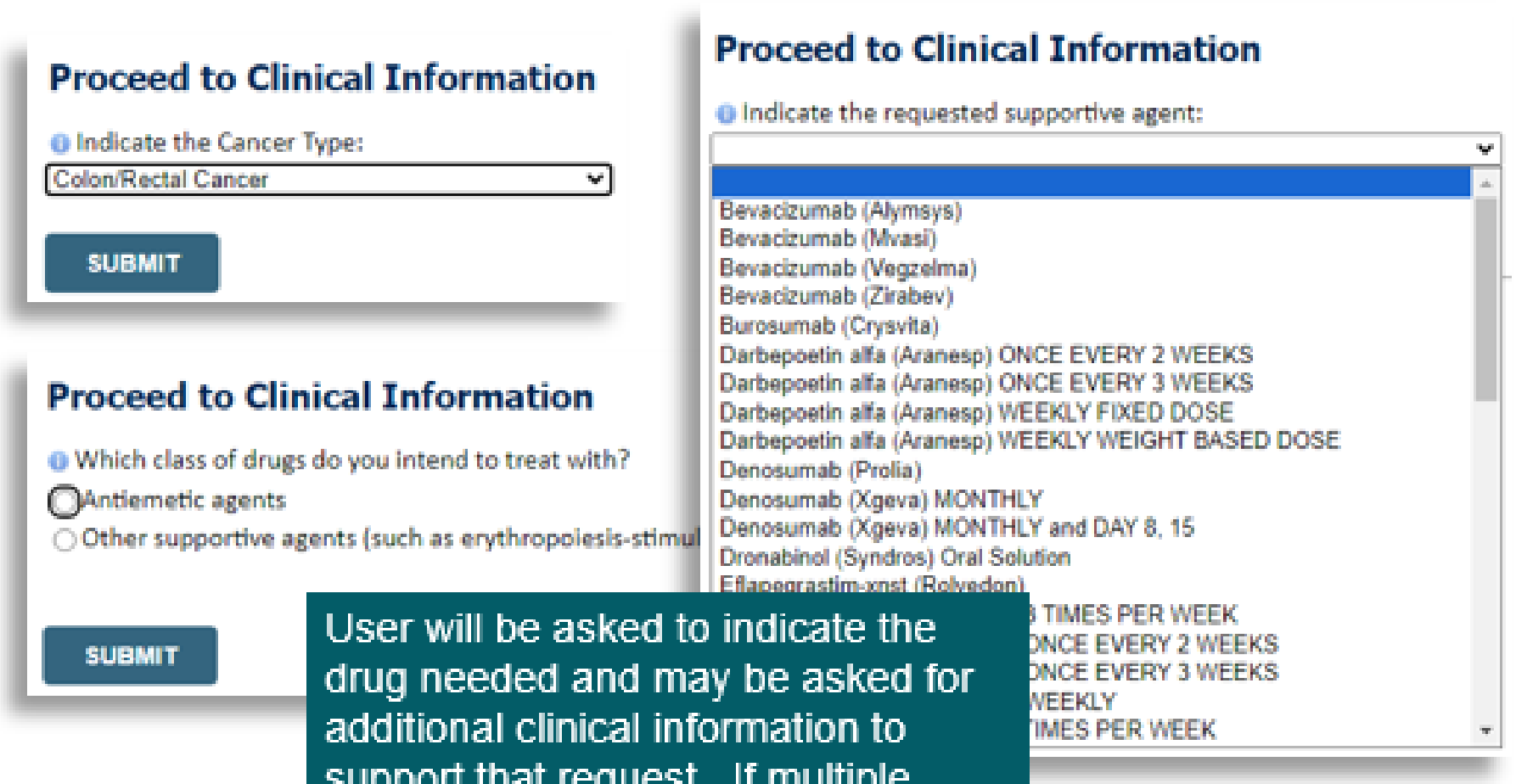
Provider Experience – Case Submission - Supportives



User will be asked to indicate the drug needed and may be asked for additional clinical information to support that request. If multiple supportive drugs are needed a separate request must be entered for each drug.

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Provider Resources

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EviCore Communication Relationship Management (ECRM)

For program-related questions or concerns, please submit inquiries via the **EviCore Communication Relationship Management (ECRM)** application.
Common issues addressed through ECRM include:

- Questions regarding accreditation and/or credentialing
- Requests for an authorization to be re-sent to the health plan
- Complaints and grievances
- Eligibility issues (member, rendering facility, and/or ordering physician)
- Issues experienced during case creation
- Reports of system issues

ECRM is available **24/7**. Users can login or register **HERE**.

Provider Resource Website

ECRM Support

- Email: ECRMSupport@EviCore.com

Provider Resource Pages

EviCore's Provider Experience team maintains provider resource pages that contain specific Sleep Diagnostic educational materials to assist providers and their staff on a daily basis. The provider resource page will include, but is not limited to, the following educational materials:

- Provider Training
- CPT code list(s)
- Quick Reference Guide (QRG)
- Frequently Asked Questions (FAQ) Document

To access these helpful resources, please visit:

https://www.EviCore.com/resources
(Choose specific health plan from the dropdown menu)

EviCore also maintains online resources not specific to health plans, such as guidelines and our required clinical information checklist.

To access these helpful resources, visit EviCore's Providers' Hub.

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Ongoing sessions for Web Portal Training

- Provides step-by-step guidance on submitting requests through both the EviCore CareCore National platform and EviCore MedSolutions platform.
- Includes portal registration, authorization lookup, and scheduling Peer-to-Peer consultations.

Register for Provider Sessions:

Provider's Hub > Scroll to EviCore Provider Orientation Session Registrations > Upcoming

EviCore Online Provider Resources Review Forum

The EviCore website contains multiple tools and resources to assist providers and their staff with the prior authorization process.

We invite you to attend an **Intro to EviCore Online Resources** to learn how to navigate EviCore's web site and understand all the non-health plan specific resources available on the Provider's Hub.

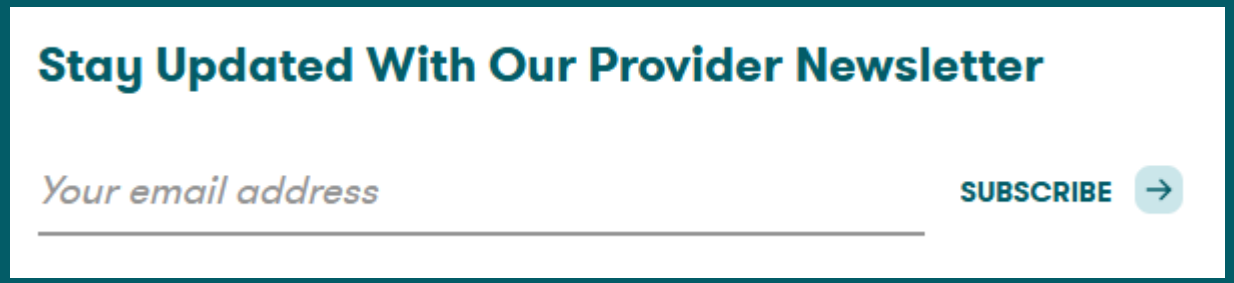
Included is a broad overview of registering and using the EviCore portal. This is great for those new to Evicore.com and the prior authorization process.

EviCore's Provider Newsletter

Stay up to date with our free provider newsletter!

To subscribe:

- Visit **EviCore.com**.
- Scroll down to the section titled **Stay Updated With Our Provider Newsletter**.
- Enter a valid email address



Thank You

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Appendix

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Peer-to-Peer (P2P) Scheduling Tool

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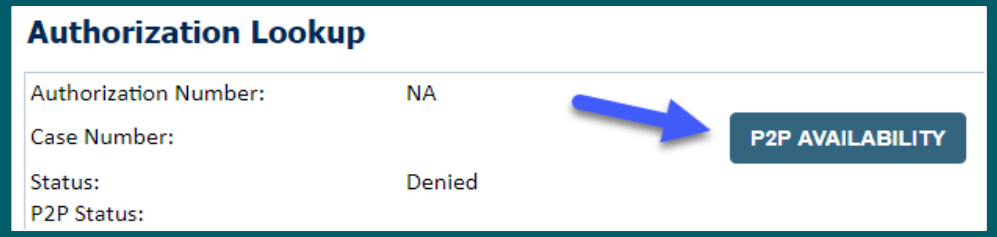
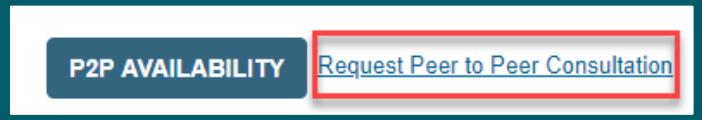
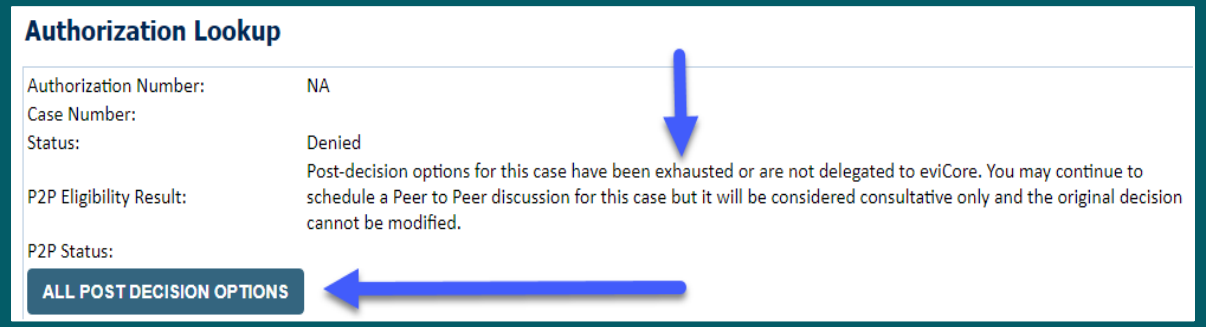
Schedule a P2P

If your case is eligible for a Peer-to-Peer (P2P) consultation, a link will display, allowing you to proceed to scheduling without any additional messaging.

1. Log-in to your account at **EviCore.com**.
2. Perform **Clinical Review Lookup** to determine the status of your request.
3. Click on the **P2P AVAILABILITY** button to determine if your case is eligible for a. Peer-to-Peer consultation
4. Note carefully any messaging that displays.*





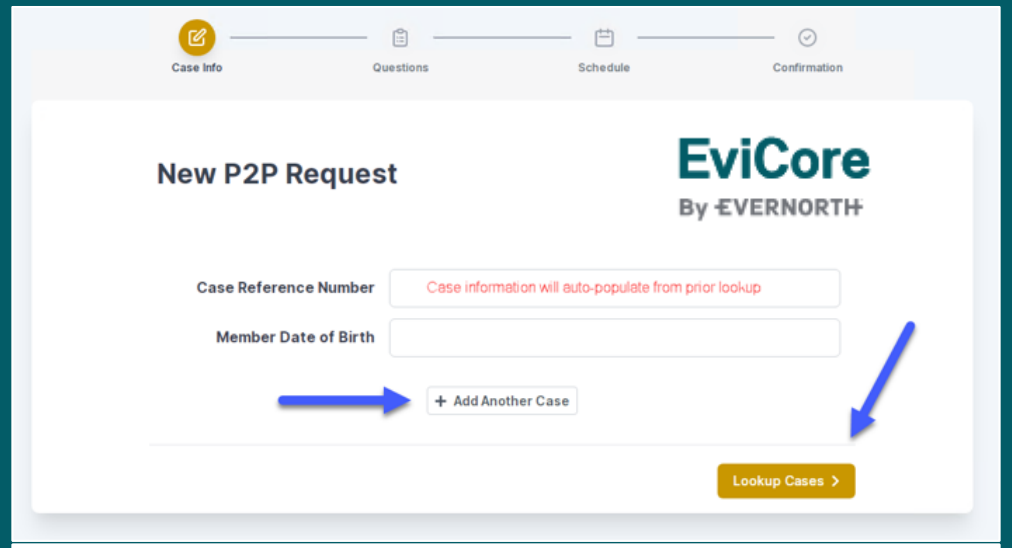


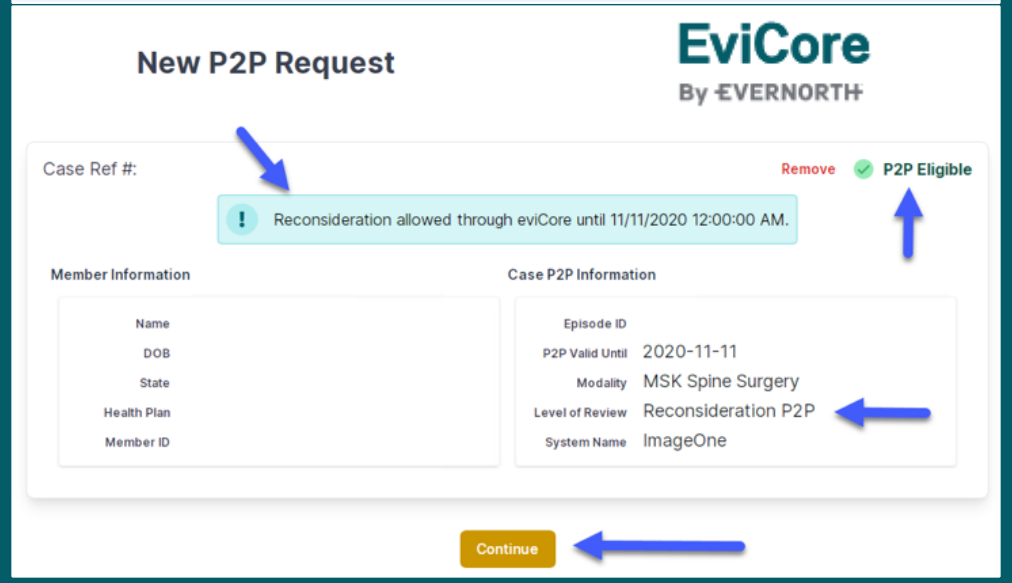
*In some instances, a Peer-to-Peer consultation is allowed, but the case decision can not be changed. In such cases, you can still request a **Consultative-Only Peer-to-Peer.** You can also click on the **ALL POST-DECISION OPTIONS** button to learn what other action can be taken.

Once the **Request Peer-to-Peer Consultation** link is selected, you will be transferred to our scheduling software via a new browser window.

Schedule a P2P

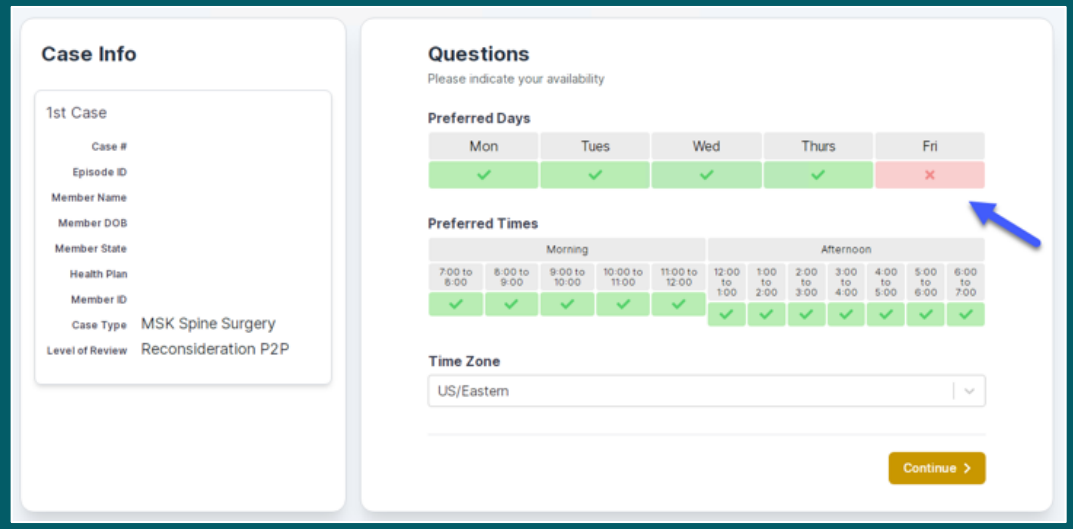
1. Upon first login, you will be asked to confirm your default time zone.
2. You will be presented with the case number and member date of birth.
3. Add another case for the same Peer-to-Peer appointment request by selecting **Add Another Case**.
4. To proceed, select **Lookup Cases**.
5. You will receive a confirmation screen with member and case information, including the level of review for the case in question.
6. Click **Continue** to proceed.

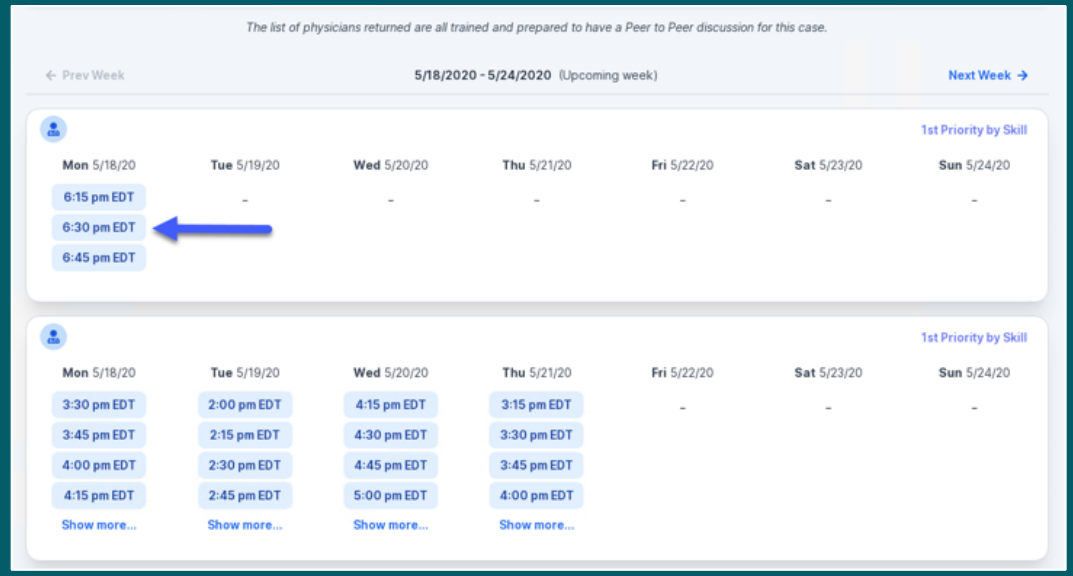




Schedule a P2P

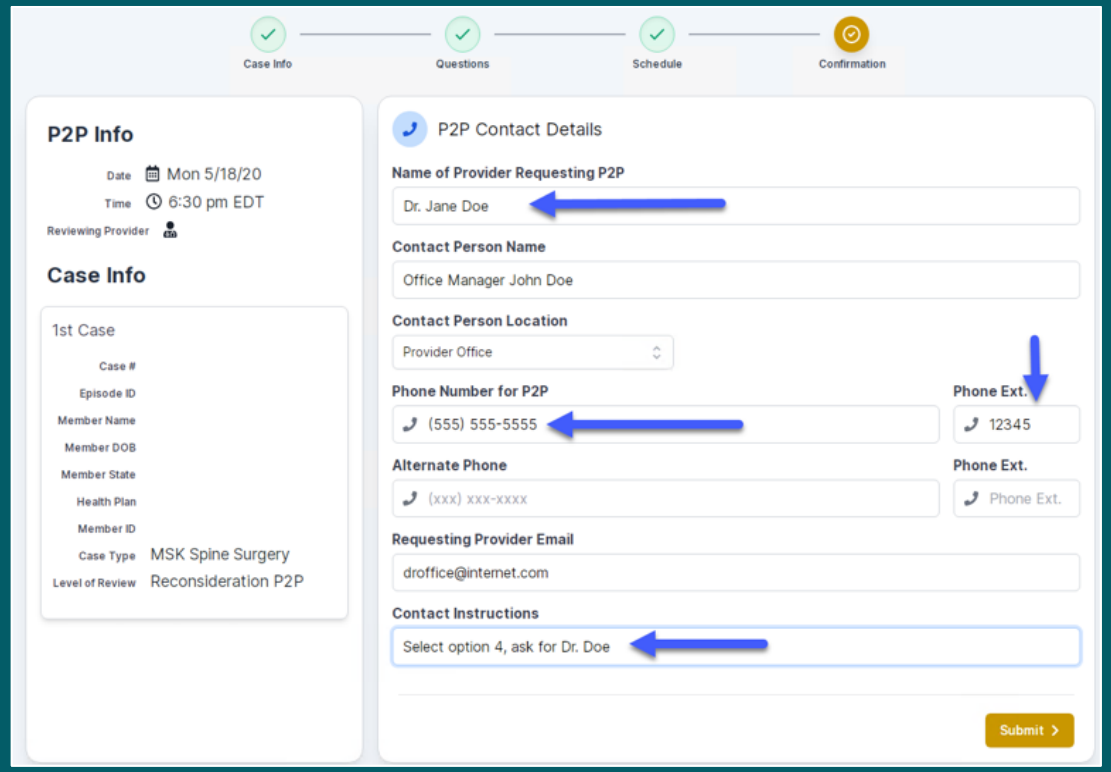
1. You will be prompted with a list of EviCore Physicians/Reviewers and appointment options.
2. Select any of the listed appointment times to continue.
3. You will be prompted to identify your preferred days and times for a Peer-to-Peer consultation (all opportunities will be automatically presented).
4. Click on any **green checkmark** to **deselect** that option, then click **Continue**.

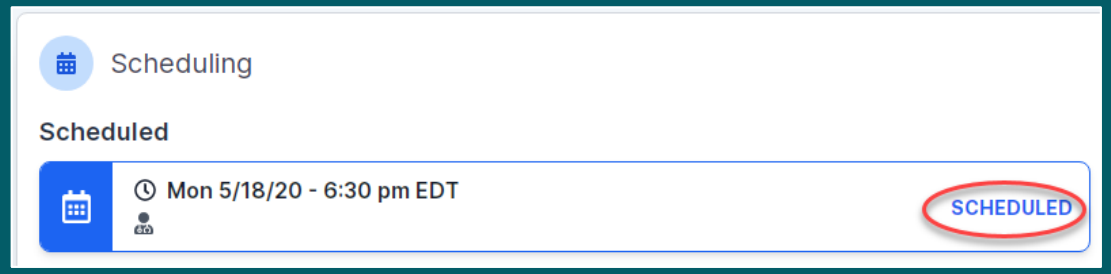




Schedule a P2P

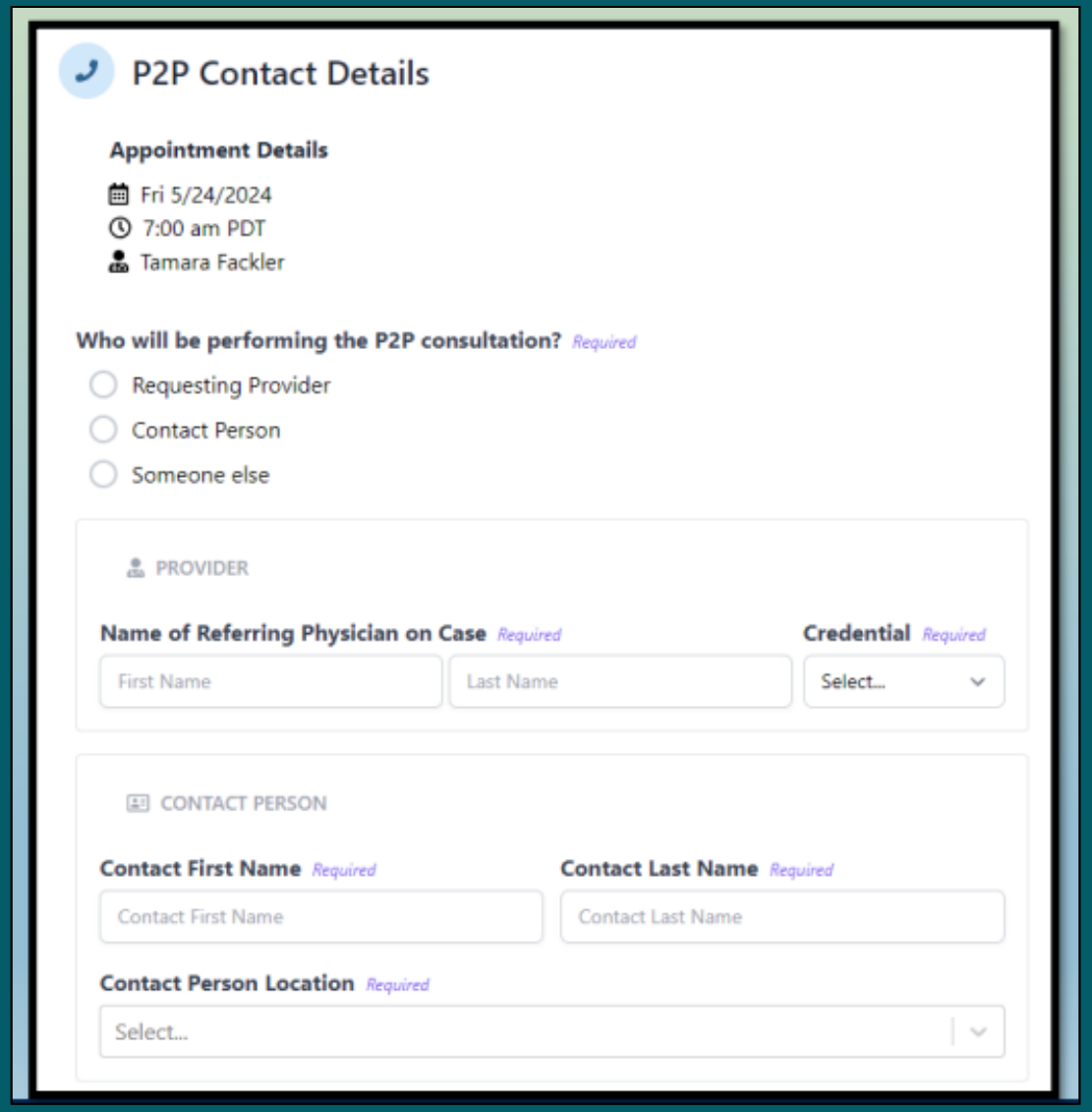
1. Update the following fields to ensure the correct person is contacted for the Peer-to-Peer appointment:
   - Name of Provider Requesting P2P
   - Phone Number for P2P
   - Contact Instructions
2. Click **Submit** to schedule the appointment.
3. You will be presented with a summary page containing the details of your scheduled appointment.
4. Confirm contact details.





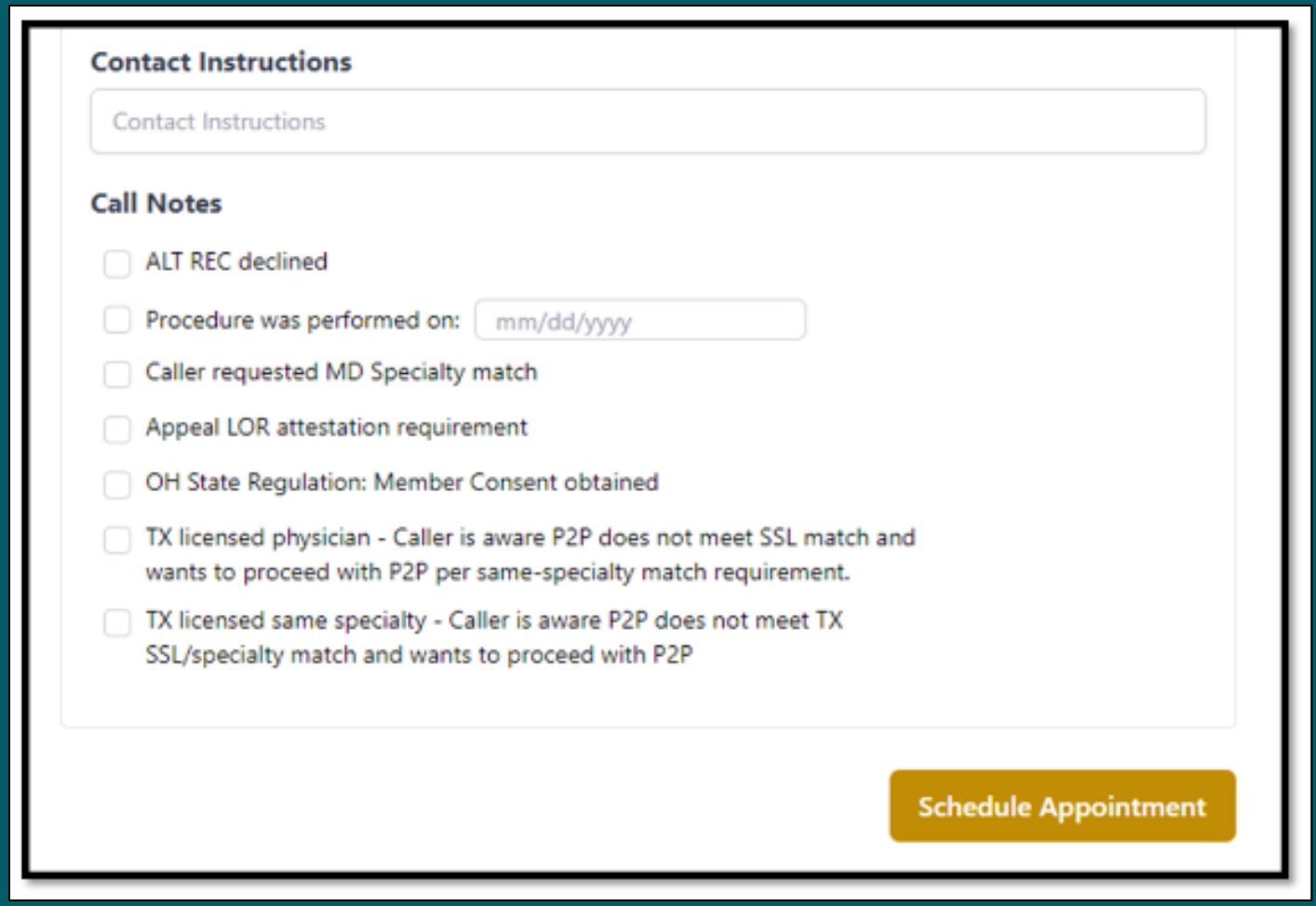
P2P Contact Details

1. Use the radio button option to select who will perform the P2P with the EviCore Medical Director.
2. Open fields will manually open to input the provider's first, last name, and their credential.



Call Notes

1. Use the radio button to select options if applicable.
2. If “Procedure was performed on” is selected, then the date is required.



Cancel or Reschedule a P2P Appointment

To cancel or reschedule an appointment:

1. Access the scheduling software and select **My P2P Requests** on the left-pane navigation.
2. Select the request you would like to modify from the list of available appointments.
3. When the request appears, click on the schedule link. An appointment window will open.
4. Click on the **Actions** drop-down and choose the appropriate action:
   - **If choosing to reschedule,** select a new date or time as you did initially.
   - **If choosing to cancel,** input a cancellation reason.
5. Close the browser once finished.